| Fill           | in this inform                | nation to identify your                         | case:  |   |                         |            |                               |
|----------------|-------------------------------|---|--|---|-------------------------|------------|-------------------------------|
| Deb            | tor 1                         | Keith Lee Barton                                |  |   |                         |            |                               |
| Deb            | tor 2                         | First Name                                      | Middle Name  | Last Name   |                         |            |                               |
| (Spo           | use if, filing)               | First Name                                      | Middle Name  | Last Name   |                         |            |                               |
| Unit           | ed States Bar                 | kruptcy Court for the:                          | SOUTHERN DISTRIC                                       | T OF MISSISSIPPI  |                         |            |                               |
| Cas<br>(if kno | e number                      |   |  |   |                         | _          | ck if this is an ended filing |
| Su             | mmary o                       |   |  | nd Certain Statistica   |                         |            | 12/15                         |
| nfor           | mation. Fill of original form | ut all of your schedule                         | es first; then complete                                | e are filing together, both are e<br>the information on this form. If<br>ck the box at the top of this pa | you are filing amend    |            |                               |
|                |                               |   |  |   |                         |            | assets<br>e of what you own   |
| 1.             |                               | <b>B: Property</b> (Official Fo                 |  |   |                         | \$         | 0.00                          |
|                | 1b. Copy line                 | e 62, Total personal pro                        | perty, from Schedule A/B                               |   |                         | \$         | 9,603.00                      |
|                | 1c. Copy line                 | e 63, Total of all property                     | y on Schedule A/B                                      |   |                         | \$         | 9,603.00                      |
| Part           | 2: Summa                      | arize Your Liabilities                          |  |   |                         |            |                               |
|                |                               |   |  |   |                         |            | liabilities<br>unt you owe    |
| 2.             |                               |   | laims Secured by Propen<br>mn A, Amount of claim, a    | ty (Official Form 106D)<br>t the bottom of the last page of P   | art 1 of Schedule D     | \$         | 28,375,000.00                 |
| 3.             |                               |   | Unsecured Claims (Offici<br>1 (priority unsecured clai | al Form 106E/F)<br>ms) from line 6e of <i>Schedule E/F</i>  |                         | \$         | 2,325,743.00                  |
|                | 3b. Copy the                  | e total claims from Part                        | 2 (nonpriority unsecured                               | claims) from line 6j of Schedule  | E/F                     | \$_        | 17,562,224.90                 |
|                |                               |   |  |   | Your total liabilities  | \$         | 48,262,967.90                 |
| Part           | 3: Summa                      | arize Your Income and                           | Expenses   |   |                         |            |                               |
| 4.             |                               | Your Income (Official Foombined monthly incom   |  | le I  |                         | \$         | 160.00                        |
| 5.             | Schedule J:<br>Copy your m    | Your Expenses (Official onthly expenses from li | Form 106J)<br>ne 22c of <i>Schedule J</i>              |   |                         | \$_        | 0.00                          |
| Part           | 4: Answe                      | r These Questions for                           | Administrative and Sta                                 | tistical Records  |                         |            |                               |
| 6.             | -                             | •   | er Chapters 7, 11, or 13 on this part of the form.     | ?<br>Check this box and submit this fo  | rm to the court with yo | ur other s | chedules.                     |
| 7.             | ■ Yes What kind o             | f debt do you have?                             |  |   |                         |            |                               |
|                |                               |   |  | debts are those "incurred by an 9g for statistical purposes. 28 U.  |                         | a person   | al, family, or                |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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| Deb | tor 1 | Keith Lee Barton Case number (if known)   |    |
|-----|-------|---|----|
| 8.  |       | the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form -1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14. | \$ |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Tota | l claim      |
|--|------|--------------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$_  | 0.00         |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_  | 2,325,743.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$   | 0.00         |
| 9d. Student loans. (Copy line 6f.)   | \$_  | 0.00         |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_  | 0.00         |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_ | 0.00         |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 2,325,743.00 |

| Fill in t                | his info                             | rmation to identif  | y vour case and   | I this filing:   |  |                             |   |
|--------------------------|--------------------------------------|---|---|--|--|-----------------------------|---|
| Debtor                   |                                      |   |   | · tillo illiligi   |  |                             |   |
| Deptor                   | 1                                    | Keith Lee E   |   | ddle Name  | Last Name  |                             |   |
| Debtor                   |                                      | First Name  | Mi  | ddle Name  | Last Name  |                             |   |
| (Spouse,                 | -                                    |   |   |  |  |                             |   |
| United                   | States B                             | ankruptcy Court fo  | or the: SOUTH   | ERN DISTRICT (   | OF MISSISSIPPI   |                             |   |
| Case n                   | umber                                |   |   |  |  |                             | ☐ Check if this is an                             |
|                          |                                      |   |   |  |  |                             | amended filing                                    |
|                          |                                      |   |   |  |  |                             |   |
| Offic                    | ial Fo                               | orm 106A/I  | B   |  |  |                             |   |
| Sch                      | edu                                  | le A/B: P   | roperty   |  |  |                             | 12/15   |
| think it fi              | its best.<br>ion. If mo<br>every que | Be as complete and<br>ore space is needed<br>estion.      | d accurate as poss<br>l, attach a separate                                    | sible. If two marrie<br>e sheet to this fori                 | once. If an asset fits in more than<br>ad people are filing together, both<br>m. On the top of any additional pa<br>e You Own or Have an Interest In | are equally responsible for | supplying correct                                 |
| 1. <b>Do yo</b>          | u own or                             | have any legal or e                                       | equitable interest i  | in any residence, l  | building, land, or similar property  | ?                           |   |
| ■ NI≏                    | . Go to Pa                           | art 2   |   |  |  |                             |   |
| _                        |                                      | is the property?  |   |  |  |                             |   |
|                          | s. Where                             | is the property:  |   |  |  |                             |   |
| Part 2:                  | Describe                             | e Your Vehicles   |   |  |  |                             |   |
| □ No ■ Ye                | )                                    | rucks, tractors, s  | sport utility verili  | oles, motorcyck  |  |                             |   |
| 3.1 I                    | Make:                                | Toyota  |   | Who has an inter   | rest in the property? Check one  |                             | claims or exemptions. Put                         |
| ı                        | Model:                               | Tundra  |   | ■ Debtor 1 only  |  |                             | laims Secured by Property.                        |
|                          | Year:                                | 2005  |   | Debtor 2 only  |  | Current value of the        | Current value of the                              |
|                          | Approxima<br>Other info              | ate mileage:  | 250,000   | Debtor 1 and D   | Debtor 2 only the debtors and another  | entire property?            | portion you own?                                  |
|                          |                                      |   |   | _  | s community property   | \$2,953.00                  | \$2,953.00  |
| Exam  No  Ye  5 Add page | the dolles you h                     | ats, trailers, motor lar value of the ponave attached for | rs, personal wate<br>ortion you own<br>Part 2. Write that<br>d Household Item | rcraft, fishing ves<br>for all of your er<br>at number here. | nal vehicles, other vehicles, and seels, snowmobiles, motorcycle natives from Part 2, including and effollowing items?                               | accessories                 | \$2,953.00  Current value of the portion you own? |
|                          |                                      | goods and furnish   |   |  |  |                             | Do not deduct secured claims or exemptions.       |

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

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| D  | ebtor 1           | Keith Lee B   | arton   | Case                                   | number (if known)      |  |
|----|-------------------|---|---|--|------------------------|--|
|    | ■ Yes.            | Describe  |   |  |                        |  |
|    |                   |   | Pool table-<br>In pieces  |  |                        | \$5,000.00   |
| 7. | ■ No              | les: Televisions a                                      | nd radios; audio, video, stereo, and dig<br>phones, cameras, media players, gam |  | scanners; music coll   | lections; electronic devices                                 |
| 8. | Collectil Example | bles of value<br>les: Antiques and                      | figurines; paintings, prints, or other art<br>ons, memorabilia, collectibles    | work; books, pictures, or other art ob | ojects; stamp, coin, o | r baseball card collections;                                 |
| 9. | Exampl  No        | ent for sports a<br>les: Sports, photo<br>musical instr | graphic, exercise, and other hobby equ  | uipment; bicycles, pool tables, golf c | lubs, skis; canoes an  | d kayaks; carpentry tools;                                   |
| 10 | ■ No              |   | s, shotguns, ammunition, and related e  | quipment                               |                        |  |
| 11 | □ No              |   | othes, furs, leather coats, designer wea  | ar, shoes, accessories                 |                        |  |
| 12 | □ No              | ,   | Clothes welry, costume jewelry, engagement rin                                  | ngs, wedding rings, heirloom jewelry   | v, watches, gems, gol  | <b>\$750.00</b> d, silver                                    |
|    |                   |   | Jewelry   |  |                        | \$400.00   |
| 13 | Examp<br>■ No     | arm animals bles: Dogs, cats, Describe                  | birds, horses   |  |                        |  |
| 14 | ■ No              | her personal an   | d household items you did not alrea   | dy list, including any health aids y   | you did not list       |  |
| 15 |                   |   | of all of your entries from Part 3, inc<br>number here                          |  | have attached          | \$6,150.00   |
|    |                   | scribe Your Finan                                       |   |  |                        |  |
| D  | o you ov          | vn or have any l  | egal or equitable interest in any of th   | ne following?                          |                        | Current value of the portion you own?  Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

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| De  | ebtor 1         | Keith Lee Ba                            | irton   |                                 | Case number (if known)  |                          |
|-----|-----------------|---|---|---------------------------------|---|--------------------------|
| 16. | Cash<br>Examp   | oles: Money you h                       | nave in your wallet, in your h                                  | ome, in a safe deposit box,     | , and on hand when you file your petition                                 |                          |
|     |                 |   |   |                                 |   |                          |
|     |                 |   |   |                                 |   |                          |
| 17. |                 |   | avings, or other financial acc<br>If you have multiple accounts |                                 | sit; shares in credit unions, brokerage house list each.                  | es, and other similar    |
|     | ☐ No            |   |   |                                 |   |                          |
|     | Yes             |   |   | Institution name:               |   |                          |
|     |                 |   | 47.4 Objection  | City National Ba                | ank   | ¢500.00                  |
|     |                 |   | 17.1. Checking  | Nashville                       |   | \$500.00                 |
| 18. | Exam            |   | or publicly traded stocks investment accounts with br           | okerage firms, money marl       | ket accounts  |                          |
|     | ■ No            |   | Institution or issuer   | name:                           |   |                          |
|     | <b>—</b> 103    | ••••••                                  |   |                                 |   |                          |
| 19. |                 | ublicly traded sto<br>venture           | ock and interests in incorp                                     | orated and unincorporate        | ed businesses, including an interest in a                                 | an LLC, partnership, and |
|     |                 | Give specific info                      | ormation about them   |                                 |   |                          |
|     | <b>—</b> 103.   | Oive specific fine                      | Name of entity:   |                                 | % of ownership:   |                          |
| 20. | Negot           | iable instruments                       | prate bonds and other negonal checks, care those you cannot tra | shiers' checks, promissory      | notes, and money orders.  |                          |
|     | ■ No            |   | •   | , ,                             |   |                          |
|     | ☐ Yes.          | Give specific info                      | rmation about them  |                                 |   |                          |
|     |                 |   | Issuer name:  |                                 |   |                          |
| 21. | Exam            | ment or pension<br>ples: Interests in I |   | 403(b), thrift savings accou    | unts, or other pension or profit-sharing plans                            | s                        |
|     | ■ No            | List sook soos                          | tt-l.   |                                 |   |                          |
|     | □ res.          | List each accoun                        | Type of account:  | Institution name:               |   |                          |
| 22. | Your s<br>Examp |   | d deposits you have made so                                     |                                 | ervice or use from a company<br>is, water), telecommunications companies, | or others                |
|     | ■ No            |   |   | Institution name or             | individual  |                          |
|     | ⊔ Yes.          |   |   | institution name or             | muividuai.  |                          |
| 23. | _               | ties (A contract fo                     | r a periodic payment of mon                                     | ey to you, either for life or f | for a number of years)  |                          |
|     | ■ No            | loc                                     | auer name and description                                       |                                 |   |                          |
|     | ☐ Yes           | 155                                     | suer name and description.                                      |                                 |   |                          |
| 24. |                 |   | on IRA, in an account in a co<br>529A(b), and 529(b)(1).        | qualified ABLE program, o       | or under a qualified state tuition prograr                                | n.                       |
|     | ☐ Yes           | Ins                                     | stitution name and descriptio                                   | n. Separately file the recor    | rds of any interests.11 U.S.C. § 521(c):                                  |                          |
| 25. | Trusts          | , equitable or fut                      | ture interests in property (                                    | other than anything listed      | d in line 1), and rights or powers exercise                               | able for your benefit    |
|     |                 | Give specific info                      | ormation about them   |                                 |   |                          |
| 26. |                 |   | ademarks, trade secrets, a<br>nain names, websites, procee      |                                 |   |                          |
|     | 110             |   |   |                                 |   |                          |

Official Form 106A/B Schedule A/B: Property page 3

 $\hfill \square$  Yes. Give specific information about them...

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| Debtor               | 1 Keith Lee Barton   |  | Case number (if known)                         |   |
|----------------------|--|--|--|---|
|                      | , ,,   |  | oldings, liquor licenses, professional licens  | ses   |
|                      | o<br>es. Give specific information ab                              | out them   |  |   |
|                      |  |  |  |   |
|                      | L  | aw license   |  | \$0.00  |
| Money                | or property owed to you?   |  |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. <b>Tax</b>       | refunds owed to you  |  |  |   |
| ■ No                 | -  |  | en 10 -  |   |
| ⊔ Y€                 | es. Give specific information ab                                   | out them, including whether you already  | y filed the returns and the tax years          |   |
| Exa<br>■ No          | •  |  | maintenance, divorce settlement, property      | settlement  |
| Exa                  | benefits; unpaid loans   |  | s, sick pay, vacation pay, workers' compe      | nsation, Social Security  |
| 31. <b>Inte</b>      | rests in insurance policies<br>amples: Health, disability, or life | insurance; health savings account (HS  | A); credit, homeowner's, or renter's insura    | nce   |
|                      | -  | ny of each policy and list its value.  |  |   |
|                      |  | any name:  | Beneficiary:                                   | Surrender or refund value:  |
|                      |  | helter Life Insurance policies<br>Term   |  | \$0.00  |
| If yo<br>son<br>■ No | ou are the beneficiary of a living<br>neone has died.              | ue you from someone who has died<br>trust, expect proceeds from a life insur       | rance policy, or are currently entitled to rec | eive property because   |
| Exa                  | amples: Accidents, employment                                      | ther or not you have filed a lawsuit o<br>disputes, insurance claims, or rights to |  |   |
|                      | . Describe each claim  |  |  |   |
|                      |  | Defamation suit against Mark   | k Kropczynski                                  | Unknown   |
| ■ No                 | •  | d claims of every nature, including c  | counterclaims of the debtor and rights to      | o set off claims  |
| 35. <b>Any</b>       | financial assets you did not                                       | already list   |  |   |
| ■ No                 | o<br>es. Give specific information                                 |  |  |   |

Official Form 106A/B Schedule A/B: Property page 4

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| Debtor 1                    | Keith Lee Barto              | on   | Case number (if known) |   |
|-----------------------------|------------------------------|--|------------------------|---|
|                             |                              | all of your entries from Part 4, including any entries fon the second se |                        | \$500.00  |
| Part 5: De                  | escribe Any Business-        | Related Property You Own or Have an Interest In. List any re   | al estate in Part 1.   |   |
| -                           |                              | or equitable interest in any business-related property?  |                        |   |
|                             | o to Part 6.  Go to line 38. |  |                        |   |
| _ 100.                      | 00 to 1110 00.               |  |                        |   |
|                             |                              |  |                        | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. <b>Acco</b> u<br>□ No   | unts receivable or co        | ommissions you already earned  |                        |   |
| Yes.                        | . Describe                   |  |                        |   |
|                             | R                            | esidual interest in lawsuits through APJP (no c  | ownership interest     |   |
|                             | ir                           | APJP)  |                        |   |
|                             |                              | esidual interest in lawsuits through Mesh Advo<br>wnership interest in Mesh Advocates)   | ocates ( no            | Unknown   |
|                             |                              |  |                        |   |
|                             |                              |  |                        | \$0.00  |
| ■ No                        | . Describe                   | oment, supplies you use in business, and tools of you  | ır trade               |   |
|                             | . Describe                   |  |                        |   |
| 42. <b>Intere</b> :<br>□ No | sts in partnerships          | or joint ventures  |                        |   |
| ■ Yes.                      | . Give specific inform       | nation about them  |                        |   |
|                             |                              | Name of entity:  | % of ownership:        |   |
|                             |                              | Tyforn I, LLC<br>No Operating Agreement  | %                      | \$0.00  |
|                             |                              | Keith Barton & Assoc.,PC of Arizona  | %                      | Unknown   |
|                             | mer lists, mailing lis       | sts, or other compilations   |                        |   |
| ■ No.<br>□ Do yo            | our lists include persor     | nally identifiable information (as defined in 11 U.S.C. § 101(41)  | A))?                   |   |
|                             |                              |  |                        |   |
|                             | ■ No □ Yes. Describe         |  |                        |   |
|                             |                              |  |                        |   |

Official Form 106A/B Schedule A/B: Property

| Debto          | Keith Lee Barton  |                       | Case number (if known)       |            |
|----------------|---|-----------------------|------------------------------|------------|
| _              |   |                       |                              |            |
| _              | ny business-related property you did not already list   |                       |                              |            |
|                | No  |                       |                              |            |
| Ш              | Yes. Give specific information  |                       |                              |            |
|                | Add the dollar value of all of your entries from Part 5, including for Part 5. Write that number here                         |                       |                              | \$0.00     |
| Part 6         | Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1. | Own or Have an Intere | st In.                       |            |
| 46. <b>D</b> o | o you own or have any legal or equitable interest in any farm-  | or commercial fishir  | ng-related property?         |            |
|                | No. Go to Part 7.   |                       |                              |            |
|                | Yes. Go to line 47.   |                       |                              |            |
| Part 7         | Describe All Property You Own or Have an Interest in That You   | Did Not List Above    |                              |            |
|                | o you have other property of any kind you did not already list?<br>Examples: Season tickets, country club membership          |                       |                              |            |
|                | No  |                       |                              |            |
|                | Yes. Give specific information  |                       |                              |            |
| 54. <i>i</i>   | Add the dollar value of all of your entries from Part 7. Write that   | at number here        |                              | \$0.00     |
| Part 8         | List the Totals of Each Part of this Form   |                       |                              |            |
| 55. <b>I</b>   | Part 1: Total real estate, line 2   |                       | <u> </u>                     | \$0.00     |
| 56. <b>I</b>   | Part 2: Total vehicles, line 5  | \$2,953.00            |                              |            |
| 57. <b>I</b>   | Part 3: Total personal and household items, line 15   | \$6,150.00            |                              |            |
|                | Part 4: Total financial assets, line 36   | \$500.00              |                              |            |
|                | Part 5: Total business-related property, line 45  | \$0.00                |                              |            |
|                | Part 6: Total farm- and fishing-related property, line 52   | \$0.00                |                              |            |
| 61. <b>I</b>   | Part 7: Total other property not listed, line 54 +  | \$0.00                |                              |            |
| 62.            | Total personal property. Add lines 56 through 61  | \$9,603.00            | Copy personal property total | \$9,603.00 |
| 63.            | Total of all property on Schedule A/B. Add line 55 + line 62  |                       |                              | \$9,603.00 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill                     | l in this inforn   | nation to identify your case:  |   |                               |  |  |
|--------------------------|--|--|---|-------------------------------|--|--|
| De                       | btor 1   | Keith Lee Barton   |   |                               |  |  |
| De                       | btor 2   | First Name   | Middle Name   | L                             | ast Name   |  |
|                          | ouse if, filing)   | First Name   | Middle Name   | L                             | ast Name   |  |
| Un                       | ited States Ba   | nkruptcy Court for the: SOL  | JTHERN DISTRICT OF  | MISS                          | ISSIPPI  |  |
|                          | se number<br>nown)   |  |   |                               |  | ☐ Check if this is an amended filing   |
| _                        | · · · · -  | 4000   |   |                               |  |  |
|                          |  | <u>rm 106C</u><br>e C: The Prope   | erty Vou Cla  | im                            | as Evemnt  | 4/16   |
|                          |  | •  |   |                               | •  |  |
| the<br>nee               | property you li  | sted on Schedule A/B: Propert d attach to this page as many of                                   | y (Official Form 106A/B)  | as yo                         | our source, list the property that you   | or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and  |
| spe<br>any<br>fun<br>exe | cific dollar an<br>applicable st<br>ds—may be u<br>mption to a p   | nount as exempt. Alternative<br>tatutory limit. Some exemption<br>inlimited in dollar amount. Ho | ly, you may claim the tons—such as those for owever, if you claim ar    | full fai<br>r healt<br>r exen | ir market value of the property be<br>th aids, rights to receive certain b<br>option of 100% of fair market valu | One way of doing so is to state a ing exempted up to the amount of senefits, and tax-exempt retirement se under a law that limits the t, your exemption would be limited |
| Pa                       | rt 1: Identif  | fy the Property You Claim as   | Exempt  |                               |  |  |
| 1.                       | Which set of   | exemptions are you claimin   | g? Check one only, eve  | n if yo                       | our spouse is filing with you.   |  |
|                          | ■ You are cla  | aiming state and federal nonba   | inkruptcy exemptions.   | 11 U.S                        | S.C. § 522(b)(3)   |  |
|                          | ☐ You are cla  | aiming federal exemptions. 11  | U.S.C. § 522(b)(2)  |                               |  |  |
| 2.                       | For any prop   | perty you list on Schedule A/  | B that you claim as ex  | empt,                         | fill in the information below.   |  |
|                          | Brief description of the property and line on Schedule A/B that lists this property  Current value of the Amount of the exemption you cl |  |   |                               | ount of the exemption you claim  | Specific laws that allow exemption   |
|                          |  |  | Copy the value from Check only one box for each exemption. Schedule A/B |                               |  |  |
|                          | -  | a Tundra 250,000 miles   | \$2,953.00  | <b>\$4,850.00</b>             |  | Miss. Code Ann. § 85-3-1(a)  |
|                          | Line from Sch  | hedule A/B: <b>3.1</b>   |   |                               | 100% of fair market value, up to any applicable statutory limit  |  |
|                          | Pool table-  |  | \$5,000.00  |                               | \$4,000.00   | Miss. Code Ann. § 85-3-1(a)  |
|                          | In pieces Line from Sch  | hedule A/B: <b>6.1</b>   |   |                               | 100% of fair market value, up to any applicable statutory limit  |  |
|                          | Clothes  |  | \$750.00  |                               | \$750.00   | Miss. Code Ann. § 85-3-1(a)  |
|                          | Line from Sch  | hedule A/B: <b>11.1</b>  |   |                               | 100% of fair market value, up to any applicable statutory limit  |  |
|                          | Jewelry  | hadula A/D <b>12.1</b>   | \$400.00  |                               | \$400.00   | Miss. Code Ann. § 85-3-1(a)  |
|                          | Line from Scr  | hedule A/B: <b>12.1</b>  |   |                               | 100% of fair market value, up to any applicable statutory limit  |  |
| 3.                       |  | ming a homestead exemption<br>djustment on 4/01/19 and every                                     |   |                               | led on or after the date of adjustme   | nt.)   |
|                          |  |  | red by the exemption w  | ithin 1                       | ,215 days before you filed this case   | ?  |
| Offi                     | ☐ Ye   | es<br>S Sc   | hedule C: The Propert   | v You                         | Claim as Exemnt  | page 1 of 2  |
| اللار                    | July Collin 1000   | . 36   | aaa. o. mid mopell  | , . ou                        | Grann as Excilipt  | page i Ui  |

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| Debtor 1 | Keith Lee Barton | Case number (if known) |  |
|----------|------------------|------------------------|--|
|          |                  |                        |  |

| Debtor 1                    | Keith Lee Barto          | ır case:  |                          |  |                               |
|-----------------------------|--------------------------|---|--------------------------|--|-------------------------------|
| Debior 1                    | First Name               | Middle Name Last Name   |                          |  |                               |
| Debtor 2                    | First Name               | Middle Nome Lost Nome   |                          |  |                               |
| (Spouse if, filing)         | First Name               | Middle Name Last Name   |                          |  |                               |
| United States Bank          | kruptcy Court for the    | SOUTHERN DISTRICT OF MISSISSIPPI  |                          |  |                               |
| Case number                 |                          |   |                          |  | c if this is an<br>ded filing |
| Official Form<br>Schedule [ |                          | Who Have Claims Secure  | ed by Propert            | у  | 12/15                         |
|                             |                          | If two married people are filing together, both are cout, number the entries, and attach it to this form.   |                          |  |                               |
| 1. Do any creditors h       | ave claims secured by    | y your property?  |                          |  |                               |
| ☐ No. Check t               | this box and submit t    | his form to the court with your other schedules.  | You have nothing else to | o report on this form.                       |                               |
| Yes. Fill in a              | all of the information   | below.  |                          |  |                               |
| Part 1: List All            | Secured Claims           |   |                          |  |                               |
| 2. List all secured cl      | laims. If a creditor has | more than one secured claim, list the creditor separate   | Column A                 | Column B                                     | Column C                      |
| for each claim. If mor      | re than one creditor has | s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  |                          | Value of collateral that supports this claim | Unsecured portion If any      |
| 2.1 Litchfield C            | Capital                  | Describe the property that secures the claim:   | \$28,375,000.00          | Unknown                                      | Unknown                       |
| Creditor's Name             |                          | 50% of consulting fees w/APJP;<br>100% for 300 Mesh Advocates TVM<br>cases;50% of balance<br>Resid. interest in lawsuits through<br>Mesh Advocates TVM cases<br>As of the date you file, the claim is: Check all that |                          |  |                               |
| 1635 NGree<br>Mesa, AZ 8    | enfield Rd116            | apply.  |                          |  |                               |
|                             | City, State & Zip Code   | ☐ Contingent ☐ Unliquidated   |                          |  |                               |
| rumber, eures, e            | only, chang a zip code   | ☐ Disputed  |                          |  |                               |
| Who owes the deb            | t? Check one.            | Nature of lien. Check all that apply.   |                          |  |                               |
| ■ Debtor 1 only             |                          | ■ An agreement you made (such as mortgage or s  | ecured                   |  |                               |
| Debtor 2 only               |                          | car loan)   |                          |  |                               |
| ☐ Debtor 1 and Deb          |                          | Statutory lien (such as tax lien, mechanic's lien)  |                          |  |                               |
| ☐ Check if this clai        |                          | ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)  |                          |  |                               |
| Date debt was incur         | rred                     | Last 4 digits of account number   |                          |  |                               |
|                             |                          |   |                          |  |                               |
| Add the dollar value        | ue of vour entries in C  | column A on this page. Write that number here:  | \$28,375,00              | 00.00  |                               |

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| Fill                  | in this inform   | nation to identify your o                                    | 250.   |                                    |                            |   |   |                                  |
|-----------------------|--|--|--|------------------------------------|----------------------------|---|---|----------------------------------|
|                       |  | •                      | 430.   |                                    |                            |   |   |                                  |
| Deb                   | otor 1   | Keith Lee Barton First Name                                  | Middle Name  | Last Nam                           | e                          |   |   |                                  |
|                       | otor 2<br>use if, filing)                              | First Name   | Middle Name  | Last Nam                           | Δ                          |   |   |                                  |
|                       |  |  |  |                                    |                            |   |   |                                  |
| Uni                   | ted States Bar   | nkruptcy Court for the:                                      | SOUTHERN DISTRICT OF I   | MISSISSIPI                         | 91                         |   |   |                                  |
|                       | se number  |  |  |                                    |                            |   | _   | if this is an<br>led filing      |
| Sc                    |  | /F: Creditors W  | ho Have Unsecure   |                                    |                            | or creditors with NON                             |   | 12/15                            |
| Sche<br>Sche<br>left. | edule G: Execut<br>edule D: Credito<br>Attach the Cont | ory Contracts and Unexpi<br>ors Who Have Claims Secu         | that could result in a claim. Also<br>red Leases (Official Form 106G)<br>rred by Property. If more space i<br>e. If you have no information to               | . Do not incl<br>is needed, co     | ude any cre<br>py the Part | ditors with partially s<br>you need, fill it out, | secured claims that a<br>number the entries i | are listed in n the boxes on the |
| Par                   | t 1: List Al   | of Your PRIORITY Un  | secured Claims   |                                    |                            |   |   |                                  |
| 1.                    | Do any credito   | rs have priority unsecured                                   | l claims against you?  |                                    |                            |   |   |                                  |
|                       | ☐ No. Go to Pa   | art 2.   |  |                                    |                            |   |   |                                  |
|                       | Yes.   |  |  |                                    |                            |   |   |                                  |
|                       | identify what typ<br>possible, list the                | e of claim it is. If a claim has claims in alphabetical orde | . If a creditor has more than one p<br>s both priority and nonpriority amor<br>r according to the creditor's name.<br>ticular claim, list the other creditor | unts, list that<br>. If you have r | claim here a               | nd show both priority a                           | and nonpriority amoun                         | ts. As much as                   |
|                       |  | ·  | ee the instructions for this form in t   |                                    | booklet.)                  | Total claim                                       | Priority<br>amount                            | Nonpriority amount               |
|                       |  |  |  |                                    |                            | \$2,099,840.                                      | \$2,099,840.0                                 | amount                           |
| 2.1                   | IRS  |  | Last 4 digits of acco  | ount number                        |                            | 00  | 0   | \$0.00                           |
|                       | Priority Cre   | ditor's Name   |  |                                    | 2000 00                    | ~ ~~~   |   |                                  |
|                       | P.O. Box<br>Philadel                                   | x 7346<br>phia, PA 19101                                     | When was the debt  | incurred?                          | 2000,20<br>012             | 07,2008,2009,2                                    | -   |                                  |
|                       |  | reet City State Zlp Code                                     | As of the date you f   | ile, the claim                     | is: Check a                | II that apply                                     |   |                                  |
|                       | Who incurred   | the debt? Check one.   | ☐ Contingent   |                                    |                            |   |   |                                  |
|                       | Debtor 1 or  | nly  | ☐ Unliquidated   |                                    |                            |   |   |                                  |
|                       | Debtor 2 or  | nly  | ☐ Disputed   |                                    |                            |   |   |                                  |
|                       | Debtor 1 ar  | nd Debtor 2 only   | Type of PRIORITY u   | ınsecured cl                       | aim:                       |   |   |                                  |
|                       | ☐ At least one   | e of the debtors and anothe                                  | Domestic support   | t obligations                      |                            |   |   |                                  |
|                       | ☐ Check if th  | nis claim is for a commun                                    | ity debt Taxes and certain   | n other debts                      | ou owe the                 | government  |   |                                  |
|                       |  | ubject to offset?  | ☐ Claims for death of  |                                    |                            |   |   |                                  |
|                       | ■ No   |  | Other. Specify   |                                    |                            |   |   |                                  |

| Debto  | or 1 Keith Lee Barton   |   | Case number (if know)           |                     |        |  |  |  |
|--------|---|---|---------------------------------|---------------------|--------|--|--|--|
| 0.0    | Utah State Tax Comm   | Lord B. B. Son Community  | \$200,402.0                     | <b>#</b> 000 400 00 | \$0.00 |  |  |  |
| 2.2    | Priority Creditor's Name c/o Sherry Busnell 210 N 1950 W                          | Last 4 digits of account number When was the debt incurred?   | 2007,2008,2009                  |                     | ψ0.00  |  |  |  |
|        | Salt Lake City, UT 84134  Number Street City State Zlp Code                       | As of the date you file, the claim  | is: Chack all that apply        |                     |        |  |  |  |
| ,      | Who incurred the debt? Check one.   | ☐ Contingent  | is. Oneck all that apply        |                     |        |  |  |  |
| I      | Debtor 1 only   | ☐ Unliquidated  |                                 |                     |        |  |  |  |
|        | □ Debtor 2 only   | ☐ Disputed  |                                 |                     |        |  |  |  |
|        | Debtor 1 and Debtor 2 only  | Type of PRIORITY unsecured cla  | ıim:                            |                     |        |  |  |  |
|        | ☐ At least one of the debtors and another   | ☐ Domestic support obligations  |                                 |                     |        |  |  |  |
|        | ☐ Check if this claim is for a community debt                                     | ■ Taxes and certain other debts y □ Claims for death or personal in   | <del>-</del>                    |                     |        |  |  |  |
|        | No  | _   | ury wrille you were intoxicated |                     |        |  |  |  |
|        | □ Yes   | Other. Specify  |                                 |                     |        |  |  |  |
| 2.3    | Utah State Tax Comm   | Last 4 digits of account number   | \$623.00                        | \$623.00            | \$0.00 |  |  |  |
|        | Priority Creditor's Name c/o Sherry Busnell 210 N 1950 W                          | When was the debt incurred?   | 2009,2011                       | -                   |        |  |  |  |
|        | Salt Lake City, UT 84134  Number Street City State Zlp Code                       | As of the date you file, the claim is: Check all that apply   |                                 |                     |        |  |  |  |
| 1      | Who incurred the debt? Check one.   | ☐ Contingent  |                                 |                     |        |  |  |  |
| I      | Debtor 1 only   | ☐ Unliquidated  |                                 |                     |        |  |  |  |
| ı      | Debtor 2 only   | ☐ Disputed  |                                 |                     |        |  |  |  |
| I      | Debtor 1 and Debtor 2 only  | Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify |                                 |                     |        |  |  |  |
| I      | At least one of the debtors and another   |   |                                 |                     |        |  |  |  |
|        | ☐ Check if this claim is for a community debt                                     |   |                                 |                     |        |  |  |  |
|        | ■ No  |   |                                 |                     |        |  |  |  |
|        | □Yes  | Withholdir  | ıg                              |                     |        |  |  |  |
| 2.4    | Utah State Tax Comm   | Last 4 digits of account number   | \$24,878.00                     | \$24,878.00         | \$0.00 |  |  |  |
|        | Priority Creditor's Name c/o Sherry Busnell 210 N 1950 W Salt Lake City, UT 84134 | When was the debt incurred?   |                                 | _                   |        |  |  |  |
|        | Number Street City State Zlp Code   | As of the date you file, the claim  | is: Check all that apply        |                     |        |  |  |  |
| '      | Who incurred the debt? Check one.   | ☐ Contingent  |                                 |                     |        |  |  |  |
|        | Debtor 1 only   | ☐ Unliquidated  |                                 |                     |        |  |  |  |
| I      | Debtor 2 only   | ☐ Disputed  |                                 |                     |        |  |  |  |
| I      | Debtor 1 and Debtor 2 only  | Type of PRIORITY unsecured cla  | nim:                            |                     |        |  |  |  |
| l      | At least one of the debtors and another   | <ul> <li>□ Domestic support obligations</li> <li>■ Taxes and certain other debts you owe the government</li> <li>□ Claims for death or personal injury while you were intoxicated</li> </ul>        |                                 |                     |        |  |  |  |
|        | ☐ Check if this claim is for a community debt ls the claim subject to offset?     |   |                                 |                     |        |  |  |  |
|        | No  | — Other Openiy  |                                 |                     |        |  |  |  |
|        | ☐ Yes   |   |                                 |                     |        |  |  |  |
| Part 2 |   |   |                                 |                     |        |  |  |  |
|        | o any creditors have nonpriority unsecured claim                                  |   |                                 |                     |        |  |  |  |
|        | No. You have nothing to report in this part. Submit                               | this form to the court with your other  | schedules.                      |                     |        |  |  |  |
|        | Yes.  |   |                                 |                     |        |  |  |  |

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more

| Debto | Keith Lee Barton  | Case number (if know)   |                      |  |  |  |
|-------|---|---|----------------------|--|--|--|
|       | an one creditor holds a particular claim, list the other rt 2.  | creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the               | Continuation Page of |  |  |  |
|       |   |   | Total claim          |  |  |  |
| 4.1   | AP Justice Partners   | Last 4 digits of account number   | \$56,233.00          |  |  |  |
|       | Nonpriority Creditor's Name<br>c/o Eric Pearson S-600<br>10421 S Jordan Gateway<br>South Jordan, UT 84095 | When was the debt incurred?   | -                    |  |  |  |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.                                       | As of the date you file, the claim is: Check all that apply   |                      |  |  |  |
|       | ■ Debtor 1 only   | ☐ Contingent  |                      |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated  |                      |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |                      |  |  |  |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |                      |  |  |  |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |                      |  |  |  |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                      |  |  |  |
|       | ■ No  | Debts to pension or profit-sharing plans, and other similar debts                                       |                      |  |  |  |
|       | Yes   | Other. Specify Business   | -                    |  |  |  |
| 4.2   | Bank of America   | Last 4 digits of account number   | \$30,000.00          |  |  |  |
|       | Nonpriority Creditor's Name P O BOX 5270 CAROL STREAM, IL 60197   | When was the debt incurred?   | -                    |  |  |  |
|       | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |                      |  |  |  |
|       | Who incurred the debt? Check one.   |   |                      |  |  |  |
|       | Debtor 1 only   | ☐ Contingent  |                      |  |  |  |
|       | ☐ Debtor 2 only   | □ Unliquidated  |                      |  |  |  |
|       | Debtor 1 and Debtor 2 only  | □ Disputed  |                      |  |  |  |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |                      |  |  |  |
|       | <u> </u>  | ☐ Student loans   |                      |  |  |  |
|       | ☐ Check if this claim is for a community debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                         |                      |  |  |  |
|       | Is the claim subject to offset?   | report as priority claims   |                      |  |  |  |
|       | No  | Debts to pension or profit-sharing plans, and other similar debts                                       |                      |  |  |  |
|       | Yes   | ■ Other. Specify  | -                    |  |  |  |
| 4.3   | Ben Franklin Plumbing   | Last 4 digits of account number   | \$1,431.00           |  |  |  |
|       | Nonpriority Creditor's Name<br>207 Century Ct.<br>Franklin, TN 37064                                      | When was the debt incurred?   | -                    |  |  |  |
|       | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |                      |  |  |  |
|       | Who incurred the debt? Check one.   |   |                      |  |  |  |
|       | Debtor 1 only   | ☐ Contingent  |                      |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated  |                      |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only  | □ Disputed  |                      |  |  |  |
|       | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |                      |  |  |  |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |                      |  |  |  |
|       | debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not                         |                      |  |  |  |
|       | Is the claim subject to offset?   | report as priority claims   |                      |  |  |  |
|       | ■ No  | Debts to pension or profit-sharing plans, and other similar debts                                       |                      |  |  |  |
|       | ☐ Yes   | Other. Specify  |                      |  |  |  |
|       |   |   |                      |  |  |  |

| Keith Lee Barton                                  | Case number (if know)   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| Brent Brown                                       | Last 4 digits of account number   | \$400,000.00   |  |  |  |  |
| 4260 StoneCreek Lane                              | When was the debt incurred?   |  |  |  |  |  |
| Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply   |  |  |  |  |  |
| Who incurred the debt? Check one.                 |   |  |  |  |  |  |
| ■ Debtor 1 only                                   | ☐ Contingent  |  |  |  |  |  |
| Debtor 2 only                                     | ☐ Unliquidated  |  |  |  |  |  |
| ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed  |  |  |  |  |  |
| ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |  |  |  |  |  |
| ☐ Check if this claim is for a community          | ☐ Student loans   |  |  |  |  |  |
| debt  | Obligations arising out of a separation agreement or divorce that you did not   |  |  |  |  |  |
| ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts   |  |  |  |  |  |
| Yes   | Other. Specify Business   |  |  |  |  |  |
| Deville Asset Manage.                             | Last 4 digits of account number   | \$5,023.00   |  |  |  |  |
| 1132 Glad Rd                                      | When was the debt incurred?   |  |  |  |  |  |
| Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply   |  |  |  |  |  |
| Who incurred the debt? Check one.                 | ,   |  |  |  |  |  |
| Debtor 1 only                                     | ☐ Contingent  |  |  |  |  |  |
| Debtor 2 only                                     | ☐ Unliquidated  |  |  |  |  |  |
| ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed  |  |  |  |  |  |
| ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |  |  |  |  |  |
| ☐ Check if this claim is for a community          | ☐ Student loans   |  |  |  |  |  |
| debt  | Obligations arising out of a separation agreement or divorce that you did not   |  |  |  |  |  |
| _   | <u></u>   |  |  |  |  |  |
| ☐ Yes   |   |  |  |  |  |  |
|   |   | •  |  |  |  |  |
| Nonpriority Creditor's Name                       | Last 4 digits of account number   | \$40,000.00  |  |  |  |  |
| Arkansas Corp.                                    | When was the debt incurred?   |  |  |  |  |  |
| Wynne, AR 72396                                   |   |  |  |  |  |  |
|   | As of the date you file, the claim is: Check all that apply   |  |  |  |  |  |
| _   |   |  |  |  |  |  |
| ■ Debtor 1 only                                   | ☐ Contingent  |  |  |  |  |  |
| Debtor 2 only                                     | ☐ Unliquidated  |  |  |  |  |  |
| ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed  |  |  |  |  |  |
| $\square$ At least one of the debtors and another | Type of NONPRIORITY unsecured claim:  |  |  |  |  |  |
| ☐ Check if this claim is for a community          | _ ****  |  |  |  |  |  |
|   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |  |  |  |  |  |
| ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts   |  |  |  |  |  |
| ☐ Yes   | ■ Other. Specify Business   |  |  |  |  |  |
|   | Brent Brown Nonpriority Creditor's Name 4260 StoneCreek Lane Provo, UT 84604 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Deville Asset Manage. Nonpriority Creditor's Name 1132 Glad Rd Colleyville, TX 76034 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  First Ntl. Bk of Wynee Nonpriority Creditor's Name Arkansas Corp. 528 Merriman Avenue Wynne, AR 72396 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Arkansas Corp. 528 Merriman Avenue Wynne, AR 72396 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | Brent Brown Nonproirty Creditor's Name 4268 StoneCreek Lane Provo, UT 84604 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 and another Colley ville, TX 76034 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 cnly Debtor 4 call betors and another Check if this claim is for a community debt Stone 1 and 2 cnly Debtor 3 conformal 4 cnly and 3 |  |  |  |  |

| Debto | Keith Lee Barton   | Case number (if know)   |              |  |  |  |  |
|-------|--|---|--------------|--|--|--|--|
| 4.7   | Foreman Financial Nonpriority Creditor's Name                        | Last 4 digits of account number   | \$1,431.00   |  |  |  |  |
|       | 10933 Camarillo St. North Hollywood, CA 91602                        | When was the debt incurred? 2015  |              |  |  |  |  |
|       | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply   |              |  |  |  |  |
|       | Who incurred the debt? Check one.                                    |   |              |  |  |  |  |
|       | ■ Debtor 1 only  | ☐ Contingent  |              |  |  |  |  |
|       | Debtor 2 only  | ☐ Unliquidated  |              |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |              |  |  |  |  |
|       | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured claim:  |              |  |  |  |  |
|       | ☐ Check if this claim is for a community                             | Student loans   |              |  |  |  |  |
|       | debt<br>Is the claim subject to offset?                              | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |  |  |  |  |
|       | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |              |  |  |  |  |
|       | Yes  | Other. Specify Business   |              |  |  |  |  |
| 4.8   | Jenn Banmiller   | Last 4 digits of account number   | \$160,000.00 |  |  |  |  |
|       | Nonpriority Creditor's Name 4155 Blackhawk Circle S-110              | When was the debt incurred?   |              |  |  |  |  |
|       | Danville, CA 94506   |   |              |  |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |              |  |  |  |  |
|       | Debtor 1 only  | ☐ Contingent  |              |  |  |  |  |
|       | Debtor 2 only  | ☐ Unliquidated  |              |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |              |  |  |  |  |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |              |  |  |  |  |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans   |              |  |  |  |  |
|       | debt Is the claim subject to offset?                                 | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims  |              |  |  |  |  |
|       | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |              |  |  |  |  |
|       | ☐ Yes  | ■ Other. Specify Business   |              |  |  |  |  |
|       |  |   |              |  |  |  |  |
| 4.9   | John Q. Binhlam  Nonpriority Creditor's Name                         | Last 4 digits of account number   | \$524.00     |  |  |  |  |
|       | 1649 Westgate Circle<br>#100   | When was the debt incurred?   |              |  |  |  |  |
|       | Brentwood, TN 37027  |   |              |  |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |              |  |  |  |  |
|       | Debtor 1 only  | ☐ Contingent  |              |  |  |  |  |
|       | Debtor 2 only  | ☐ Unliquidated  |              |  |  |  |  |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed  |              |  |  |  |  |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |              |  |  |  |  |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans   |              |  |  |  |  |
|       | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |  |  |  |  |
|       | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |              |  |  |  |  |
|       | Yes  | Other. Specify  |              |  |  |  |  |

| Debto | r 1 Keith Lee Barton                                | Case number (if know)   |              |
|-------|---|---|--------------|
| 4.1   | John Spain  | Last 4 digits of account number   | \$100,000.00 |
| 0     | Nonpriority Creditor's Name<br>8136 E. FM 4         | When was the debt incurred?   | · ,          |
|       | Grandview, TX 76050                                 |   |              |
|       | Number Street City State Zlp Code                   | As of the date you file, the claim is: Check all that apply   |              |
|       | Who incurred the debt? Check one.                   |   |              |
|       | Debtor 1 only                                       | ☐ Contingent  |              |
|       | Debtor 2 only                                       | ☐ Unliquidated  |              |
|       | ☐ Debtor 1 and Debtor 2 only                        | ☐ Disputed  |              |
|       | ☐ At least one of the debtors and another           | Type of NONPRIORITY unsecured claim:  |              |
|       | ☐ Check if this claim is for a community            | ☐ Student loans   |              |
|       | debt Is the claim subject to offset?                | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |              |
|       | □Yes  | ■ Other. Specify Business   |              |
| 4.1   | VDV Corneratone II C                                |   | ¢50,000,00   |
| 1     | KRK Cornerstone, LLC  Nonpriority Creditor's Name   | Last 4 digits of account number   | \$50,000.00  |
|       | c/o Rob Olsen                                       | When was the debt incurred?   |              |
|       | 9045 S. 1300 E                                      |   |              |
|       | Sandy, UT 84094                                     |   |              |
|       | Number Street City State ZIp Code                   | As of the date you file, the claim is: Check all that apply   |              |
|       | Who incurred the debt? Check one.                   | _   |              |
|       | Debtor 1 only                                       | Contingent  |              |
|       | Debtor 2 only                                       | ☐ Unliquidated  |              |
|       | ☐ Debtor 1 and Debtor 2 only                        | ☐ Disputed  |              |
|       | ☐ At least one of the debtors and another           | Type of NONPRIORITY unsecured claim:  |              |
|       | Check if this claim is for a community              | Student loans   |              |
|       | debt Is the claim subject to offset?                | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |
|       | No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                             |              |
|       | ☐ Yes   | ■ Other. Specify Business   |              |
| 4.1   | Medstar Funding                                     |   | \$50,000.00  |
| 2     | Nonpriority Creditor's Name                         | Last 4 digits of account number   | Ψου,υυυ.υυ   |
|       | c/o Dan Christensen<br>7301 RR 620 N S155-334       | When was the debt incurred?   |              |
|       | Austin, TX 78726  Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply   |              |
|       | Who incurred the debt? Check one.                   | As of the date you me, the dam's. Offect all that apply   |              |
|       | ■ Debtor 1 only                                     | ☐ Contingent  |              |
|       | Debtor 2 only                                       | ☐ Unliquidated  |              |
|       | Debtor 1 and Debtor 2 only                          | ☐ Disputed  |              |
|       | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |              |
|       | ☐ Check if this claim is for a community            | ☐ Student loans   |              |
|       | debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not                         |              |
|       | Is the claim subject to offset?                     | report as priority claims   |              |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |              |
|       | Yes   | ■ Other, Specify Business   |              |

| Debto | 1 Keith Lee Barton   | Case number (if know)  |                |  |  |  |  |
|-------|--|--|----------------|--|--|--|--|
| 4.1   | Mobile Echocardiograph   | Last 4 digits of account number  | \$1,642,375.49 |  |  |  |  |
| 3     | Nonpriority Creditor's Name c/o James Magleby 170 South Main St.                               | When was the debt incurred? 2006   | Ψ1,042,010.43  |  |  |  |  |
|       | Salt Lake City, UT 84101  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |                |  |  |  |  |
|       | Debtor 1 only  | ☐ Contingent   |                |  |  |  |  |
|       | Debtor 2 only  | ☐ Unliquidated   |                |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | □ Disputed   |                |  |  |  |  |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |                |  |  |  |  |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |                |  |  |  |  |
|       | debt Is the claim subject to offset?   | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                |  |  |  |  |
|       | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |                |  |  |  |  |
|       | Yes  | Other. Specify Business  |                |  |  |  |  |
| 4.1   | Nelnet   | Last 4 digits of account number  | \$116,536.41   |  |  |  |  |
|       | Nonpriority Creditor's Name U.S. Dept of Education P.O. Box 82561 Lincoln. NE 68501            | When was the debt incurred?  |                |  |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                           | As of the date you file, the claim is: Check all that apply  |                |  |  |  |  |
|       | Debtor 1 only  | ☐ Contingent   |                |  |  |  |  |
|       | ☐ Debtor 2 only  | ☐ Unliquidated   |                |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |                |  |  |  |  |
|       | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |                |  |  |  |  |
|       | ☐ Check if this claim is for a community   | Student loans  |                |  |  |  |  |
|       | debt Is the claim subject to offset?   | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims                 |                |  |  |  |  |
|       | ■ No   | □ Debts to pension or profit-sharing plans, and other similar debts  |                |  |  |  |  |
|       | Yes  | Other. Specify Student Loan  |                |  |  |  |  |
| 4.1   | North Star Funding Gro   |  | \$250,000.00   |  |  |  |  |
| 5     | Nonpriority Creditor's Name  | Last 4 digits of account number  | Ψ230,000.00    |  |  |  |  |
|       | c/o Bob Olsen<br>9045 S. 1300 E.   | When was the debt incurred?  |                |  |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                           | As of the date you file, the claim is: Check all that apply  |                |  |  |  |  |
|       | Debtor 1 only  | ☐ Contingent   |                |  |  |  |  |
|       | Debtor 2 only  | □ Unliquidated   |                |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |                |  |  |  |  |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |                |  |  |  |  |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |                |  |  |  |  |
|       | debt Is the claim subject to offset?   | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                |  |  |  |  |
|       | ■ No   | lacktriangle Debts to pension or profit-sharing plans, and other similar debts   |                |  |  |  |  |
|       | Yes  | ■ Other. Specify Business  |                |  |  |  |  |

| Debtor | 1 Keith Lee Barton   | Case number (if know)  |              |  |  |  |
|--------|--|--|--------------|--|--|--|
| 4.1    |  |  | ****         |  |  |  |
| 6      | Richard Eddington  | Last 4 digits of account number  | \$100,000.00 |  |  |  |
|        | Nonpriority Creditor's Name P.O. Box 775961                          | When was the debt incurred?  |              |  |  |  |
|        | Steamboat Springs, CO 80477  |  |              |  |  |  |
|        | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply                                  |              |  |  |  |
|        | Who incurred the debt? Check one.                                    |  |              |  |  |  |
|        | Debtor 1 only  | ☐ Contingent   |              |  |  |  |
|        | ☐ Debtor 2 only  | ☐ Unliquidated   |              |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only   | Disputed   |              |  |  |  |
|        | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |              |  |  |  |
|        | ☐ Check if this claim is for a community                             | ☐ Student loans  |              |  |  |  |
|        | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not              |              |  |  |  |
|        | Is the claim subject to offset?                                      | report as priority claims  |              |  |  |  |
|        | ■ No   | Debts to pension or profit-sharing plans, and other similar debts                            |              |  |  |  |
|        | Yes  | ■ Other. Specify Business  |              |  |  |  |
| 4.1    | Dalast Ourses  |  |              |  |  |  |
| 7      | Robert Spencer  Nonpriority Creditor's Name                          | Last 4 digits of account number  | \$200,000.00 |  |  |  |
|        | P.O. Box 100997  | When was the debt incurred?  |              |  |  |  |
|        | Fort Worth, TX 76185   |  |              |  |  |  |
|        | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply                                  |              |  |  |  |
|        | Who incurred the debt? Check one.                                    |  |              |  |  |  |
|        | ■ Debtor 1 only  | ☐ Contingent   |              |  |  |  |
|        | ☐ Debtor 2 only  | ☐ Unliquidated   |              |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |              |  |  |  |
|        | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |              |  |  |  |
|        | ☐ Check if this claim is for a community                             | ☐ Student loans  |              |  |  |  |
|        | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not              |              |  |  |  |
|        | Is the claim subject to offset?                                      | report as priority claims  |              |  |  |  |
|        | No   | Debts to pension or profit-sharing plans, and other similar debts                            |              |  |  |  |
|        | Yes  | ■ Other. Specify Business  |              |  |  |  |
| 4.1    | Rocky Mountain Defende   |  | \$22,044.00  |  |  |  |
| 8      | Nonpriority Creditor's Name  | Last 4 digits of account number  | Ψ22,044.00   |  |  |  |
|        | c/o Eric Pearson S-600   | When was the debt incurred?  |              |  |  |  |
|        | 10421 S Jordan Gateway   |  |              |  |  |  |
|        | South Jordan, UT 84095   |  |              |  |  |  |
|        | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply                                  |              |  |  |  |
|        | <u> </u>   |  |              |  |  |  |
|        | Debtor 1 only  | Contingent   |              |  |  |  |
|        | Debtor 2 only  | Unliquidated   |              |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only   | Disputed   |              |  |  |  |
|        | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured claim:   |              |  |  |  |
|        | ☐ Check if this claim is for a community                             | Student loans  |              |  |  |  |
|        | debt   | Obligations arising out of a separation agreement or divorce that you did not                |              |  |  |  |
|        | Is the claim subject to offset?                                      | report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |              |  |  |  |
|        | ■ No   |  |              |  |  |  |
|        | □Yes   | Other Specify Business   |              |  |  |  |

| Debto | r1 Keith Lee Barton                                | Case number (if know)   |             |  |  |  |
|-------|--|---|-------------|--|--|--|
| 4.1   | Chin Calutiana Dannat                              |   | ¢427.00     |  |  |  |
| 9     | Skin Solutions Dermat  Nonpriority Creditor's Name | Last 4 digits of account number   | \$127.00    |  |  |  |
|       | 200 Cool Springs Blvd. Franklin, TN 37067          | When was the debt incurred?   |             |  |  |  |
|       | Number Street City State Zlp Code                  | As of the date you file, the claim is: Check all that apply   |             |  |  |  |
|       | Who incurred the debt? Check one.                  |   |             |  |  |  |
|       | Debtor 1 only                                      | ☐ Contingent  |             |  |  |  |
|       | Debtor 2 only                                      | ☐ Unliquidated  |             |  |  |  |
|       | Debtor 1 and Debtor 2 only                         | □ Disputed  |             |  |  |  |
|       | ☐ At least one of the debtors and another          | Type of NONPRIORITY unsecured claim:  |             |  |  |  |
|       | <u> </u>   | ☐ Student loans   |             |  |  |  |
|       | ☐ Check if this claim is for a community debt      | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |             |  |  |  |
|       | Is the claim subject to offset?                    | report as priority claims   |             |  |  |  |
|       | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |             |  |  |  |
|       | Yes  | Other. Specify  |             |  |  |  |
| 4.2   | Snap Finance                                       | Last 4 digits of account number   | Unknown     |  |  |  |
| U     | Nonpriority Creditor's Name                        |   |             |  |  |  |
|       | 1760 West 2100 S<br>Salt Lake City, UT 84199       | When was the debt incurred?   |             |  |  |  |
|       | Number Street City State Zlp Code                  | As of the date you file, the claim is: Check all that apply   |             |  |  |  |
|       | Who incurred the debt? Check one.                  |   |             |  |  |  |
|       | Debtor 1 only                                      | ☐ Contingent  |             |  |  |  |
|       | Debtor 2 only                                      | ☐ Unliquidated  |             |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only                       | Disputed  |             |  |  |  |
|       | ☐ At least one of the debtors and another          | Type of NONPRIORITY unsecured claim:  |             |  |  |  |
|       | ☐ Check if this claim is for a community           | ☐ Student loans   |             |  |  |  |
|       | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |             |  |  |  |
|       | Is the claim subject to offset?                    | report as priority claims   |             |  |  |  |
|       | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |             |  |  |  |
|       | Yes  | ■ Other. Specify  |             |  |  |  |
| 4.2   | Steven Shapiro                                     | Last 4 digits of account number   | \$25,000.00 |  |  |  |
| ·     | Nonpriority Creditor's Name 5242 College DriveS-19 | When was the debt incurred?   | <u>·</u>    |  |  |  |
|       | Salt Lake City, UT 84123                           |   |             |  |  |  |
|       | Number Street City State Zlp Code                  | As of the date you file, the claim is: Check all that apply   |             |  |  |  |
|       | Who incurred the debt? Check one.                  |   |             |  |  |  |
|       | Debtor 1 only                                      | Contingent  |             |  |  |  |
|       | Debtor 2 only                                      | ☐ Unliquidated  |             |  |  |  |
|       | Debtor 1 and Debtor 2 only                         | ☐ Disputed  |             |  |  |  |
|       | At least one of the debtors and another            | Type of NONPRIORITY unsecured claim:  |             |  |  |  |
|       | Check if this claim is for a community             | Student loans   |             |  |  |  |
|       | debt<br>Is the claim subject to offset?            | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |  |  |  |
|       | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |             |  |  |  |
|       | ☐ Yes  | ■ Other. Specify Business   |             |  |  |  |

| Keith Lee Barton  | Case number (if know)  |              |  |
|---|--|--------------|--|
| Vision Imagining Serv.                                    | Last 4 digits of account number  | \$300,000.0  |  |
| Nonpriority Creditor's Name c/oRichard Howell 2401        | When was the debt incurred? 2006   | <u> </u>     |  |
| Fountainview, TX 77057  Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply  |              |  |
| Who incurred the debt? Check one.                         | , and a second s |              |  |
| ■ Debtor 1 only   | ☐ Contingent   |              |  |
| Debtor 2 only   | □ Unliquidated   |              |  |
| ☐ Debtor 1 and Debtor 2 only                              | ☐ Disputed   |              |  |
| ☐ At least one of the debtors and another                 | Type of NONPRIORITY unsecured claim:   |              |  |
| ☐ Check if this claim is for a community                  | ☐ Student loans  |              |  |
| debt Is the claim subject to offset?                      | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |              |  |
| ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |              |  |
| Yes   | Other. Specify Business  |              |  |
| Waterford Funding   | Last 4 digits of account number  | \$14,000,000 |  |
| Nonpriority Creditor's Name                               |  |              |  |
| c/o Peggy Hunt<br>136 S Main S-1000                       | When was the debt incurred?  |              |  |
| Salt Lake City, UT 84101                                  |  |              |  |
| Number Street City State Zlp Code                         | As of the date you file, the claim is: Check all that apply  |              |  |
| Who incurred the debt? Check one.                         |  |              |  |
| ■ Debtor 1 only   | ☐ Contingent   |              |  |
| ☐ Debtor 2 only   | ☐ Unliquidated   |              |  |
| ☐ Debtor 1 and Debtor 2 only                              | ☐ Disputed   |              |  |
| ☐ At least one of the debtors and another                 | Type of NONPRIORITY unsecured claim:   |              |  |
| ☐ Check if this claim is for a community                  | ☐ Student loans  |              |  |
| debt<br>Is the claim subject to offset?                   | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |              |  |
| ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |              |  |
| Yes   | Other. Specify Business  |              |  |
| Wells Fargo Card  | Last 4 digits of account number  | \$5,000.     |  |
| Nonpriority Creditor's Name                               | When we the debt income do   |              |  |
| P.O. Box 6995<br>Portland, OR 97228                       | When was the debt incurred?  |              |  |
| Number Street City State Zlp Code                         | As of the date you file, the claim is: Check all that apply  |              |  |
| Who incurred the debt? Check one.                         |  |              |  |
| Debtor 1 only   | ☐ Contingent   |              |  |
| ☐ Debtor 2 only   | ☐ Unliquidated   |              |  |
| ☐ Debtor 1 and Debtor 2 only                              | ☐ Disputed   |              |  |
| ☐ At least one of the debtors and another                 | Type of NONPRIORITY unsecured claim:   |              |  |
| ☐ Check if this claim is for a community                  | ☐ Student loans  |              |  |
| debt  | $\square$ Obligations arising out of a separation agreement or divorce that you did not  |              |  |
| Is the claim subject to offset?                           | report as priority claims  |              |  |
| ■ No  | Debts to pension or profit-sharing plans, and other similar debts  |              |  |
| □Yes  | Other. Specify   |              |  |

| Debtor 1                                | Keith Le                       | ee Barton   | Case number (if know)   |                 |                 |                               |                      |
|---|--------------------------------|---|---|-----------------|-----------------|-------------------------------|----------------------|
| 4.2<br>5                                | West Lake                      | e Financial   | Last 4 digits of account numb   | er              |                 |                               | \$6,500.00           |
|   | 4751 Wils                      | reditor's Name<br>hire Bvd S100<br>les, CA 90001                | When was the debt incurred?   |                 |                 |                               |                      |
| Ī                                       | Number Stree                   | et City State Zlp Code  d the debt? Check one.                  | As of the date you file, the cla  | im is: Check    | all that appl   | у                             |                      |
|   | ■ Debtor 1 o                   |   | ☐ Contingent  |                 |                 |                               |                      |
|   | Debtor 2 of                    | •   | ☐ Unliquidated  |                 |                 |                               |                      |
|   | _                              | •   | _ '   |                 |                 |                               |                      |
|   |                                | and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsect  | ired claim:     |                 |                               |                      |
| At least one of the debtors and another |                                |   | Student loans   | urea ciaiiii.   |                 |                               |                      |
|   | L Check if t<br>debt           | this claim is for a community                                   | _   |                 |                 | P                             |                      |
|   |                                | subject to offset?  | Obligations arising out of a s report as priority claims  | eparation ag    | reement or c    | divorce that you did not      |                      |
|   | ■ No                           | ,   | ☐ Debts to pension or profit-sh   | aring plans, a  | and other sin   | nilar debts                   |                      |
|   | ☐ Yes                          |   | Other. Specify Busines  | S               |                 |                               |                      |
| Part 3:                                 | List Othe                      | ers to Be Notified About a De                                   | ebt That You Already Listed   |                 |                 |                               |                      |
| is tryin<br>have m                      | g to collect f<br>ore than one | rom you for a debt you owe to s                                 | about your bankruptcy, for a debt the<br>comeone else, list the original credito<br>at you listed in Parts 1 or 2, list the a<br>or submit this page. | r in Parts 1    | or 2, then lis  | st the collection agency her  | e. Similarly, if you |
|   | d Address                      |   | On which entry in Part 1 or Part 2 did  | you list the o  | riginal credite | or?                           |                      |
|   | of America                     | l   | Line 4.2 of (Check one):  | ☐ Part 1: 0     | Creditors with  | h Priority Unsecured Claims   |                      |
| _                                       | ox 15019                       | 40050   |   | Part 2: 0       | Creditors with  | h Nonpriority Unsecured Clain | ns                   |
| wiimin                                  | gton, DE                       | 19050   | Last 4 digits of account number   |                 |                 |                               |                      |
|   | d Address                      |   | On which entry in Part 1 or Part 2 did  |                 | •               |                               |                      |
| Nelnet                                  |                                |   | Line 4.14 of (Check one):   |                 |                 | h Priority Unsecured Claims   |                      |
| Psnon                                   | Barrett                        |   | Last 4 digits of account number   | Part 2: 0       | Creditors with  | h Nonpriority Unsecured Clain | ns                   |
| Part 4:                                 | Add the                        | Amounts for Each Type of U                                      | Insecured Claim   |                 |                 |                               |                      |
|   | he amounts of                  |   | aims. This information is for statistic   | al reporting    | purposes o      | only. 28 U.S.C. §159. Add the | amounts for each     |
|   |                                |   |   |                 |                 | Total Claim                   |                      |
|   | 68                             | a. Domestic support obligation                                  | ıs  | 6a.             | \$              | 0.00                          |                      |
|   | otal                           |   |   |                 | -               |                               |                      |
| clai                                    | ims<br>ırt 1 6                 | o. Taxes and certain other deb                                  | ts you owe the government   | 6b.             | \$              | 2,325,743.00                  |                      |
|   | 60                             |   | I injury while you were intoxicated   | 6c.             | \$              | 0.00                          |                      |
|   | 60                             |   | nsecured claims. Write that amount here   |                 | \$              | 0.00                          |                      |
|   | 66                             | e. <b>Total Priority.</b> Add lines 6a th                       | rough 6d.   | 6e.             | \$              | 2,325,743.00                  |                      |
|   |                                |   |   |                 |                 |                               |                      |
|   |                                |   |   |                 |                 | Total Claim                   |                      |
| т.                                      | 6f                             | . Student loans   |   | 6f.             | \$              | 0.00                          |                      |
|   | otal<br>ims                    |   |   |                 |                 |                               |                      |
| from Pa                                 | rt <b>2</b> 6                  |   | separation agreement or divorce tha   | <b>t</b><br>6g. | \$              | 0.00                          |                      |
|   | 61                             | you did not report as priority<br>Debts to pension or profit-si | y ciaims<br>haring plans, and other similar debts   |                 | \$              | 0.00                          |                      |
|   | 6i                             |   | y unsecured claims. Write that amount   | 6i.             | · ——            | 17,562,224.90                 |                      |
|   |                                | here.   |   |                 | \$              | 17,302,224.30                 |                      |
|   | 6j                             | . Total Nonpriority. Add lines 6                                | 6f through 6i.  | 6j.             | \$              | 17,562,224.90                 |                      |

| Fill in this information to identify your case: |                         |                   |                |  |                                       |  |  |
|---|-------------------------|-------------------|----------------|--|---------------------------------------|--|--|
| Debtor 1  | Keith Lee Barton        |                   |                |  |                                       |  |  |
|   | First Name              | Middle Name       | Last Name      |  |                                       |  |  |
| Debtor 2  |                         |                   |                |  |                                       |  |  |
| (Spouse if, filing)                             | First Name              | Middle Name       | Last Name      |  |                                       |  |  |
| United States Bar                               | nkruptcy Court for the: | SOUTHERN DISTRICT | OF MISSISSIPPI |  |                                       |  |  |
| Case number                                     |                         |                   |                |  | Charlet Williams                      |  |  |
| (II KIIOWII)                                    |                         |                   |                |  | Check if this is an<br>amended filing |  |  |

### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for                     |
|--|---|
| 2.1 KDL Investments, LLC<br>c/o Craig Campbell<br>1635 NGreenfield Rd116<br>Mesa, AZ 85205                   | Professional Services<br>\$8,000.00/month<br>month to month |

| Fill in this in     | nformation to identify your                                     | case:                         |                           |   |   |
|---------------------|---|-------------------------------|---------------------------|---|---|
| Debtor 1            | Keith Lee Barton  | M: 111 N                      |                           |   |   |
| Debtor 2            | First Name  | Middle Name                   | Last Name                 |   |   |
| (Spouse if, filing) | First Name  | Middle Name                   | Last Name                 |   |   |
| United States       | s Bankruptcy Court for the:                                     | SOUTHERN DISTRICT             | OF MISSISSIPPI            |   |   |
| Case numbe          | er  |                               |                           |   | ☐ Check if this is an   |
| (ii kilowii)        |   |                               |                           |   | <ul><li>Check if this is an amended filling</li></ul>   |
| Official            | Form 106H   |                               |                           |   |   |
|                     | ıle H: Your Cod   | ebtors                        |                           |   | 12/15   |
| ill it out, and     |   | boxes on the left. Attach     | the Additional Page       |   | eeded, copy the Additional Page,<br>o of any Additional Pages, write  |
| 1. Do yo            | ou have any codebtors? (If                                      | you are filing a joint case,  | do not list either spouse | e as a codebtor.                        |   |
| ■ No<br>□ Yes       |   |                               |                           |   |   |
|                     | n the last 8 years, have you<br>California, Idaho, Louisiana    |                               |                           |   | y states and territories include  |
| _                   | Go to line 3.<br>Did your spouse, former spo                    | use or legal equivalent live  | with you at the time?     |   |   |
| <b>—</b> тез. г     | Dia your spouse, former spor                                    | ise, or legal equivalent live | e with you at the time!   |   |   |
| in line 2           | e again as a codebtor only i<br>16D), Schedule E/F (Official    | f that person is a guaran     | tor or cosigner. Make     | sure you have listed th                 | g with you. List the person shown<br>ne creditor on Schedule D (Officia<br>Schedule E/F, or Schedule G to fil |
|                     | olumn 1: Your codebtor<br>me, Number, Street, City, State and Z | P Code                        |                           | Column 2: The cre<br>Check all schedule | editor to whom you owe the debt s that apply:   |
| 3.1                 |   |                               |                           | ☐ Schedule D, line                      | e   |
|                     | ame   |                               |                           | ☐ Schedule E/F, I                       |   |
|                     |   |                               |                           | ☐ Schedule G, lin                       | e   |
|                     | umber Street  |                               |                           | <u> </u>                                |   |
| Cit                 | ty  | State                         | ZIP Code                  |   |   |
| 3.2                 |   |                               |                           | ☐ Schedule D, line                      | е   |
|                     | ame   |                               |                           | ☐ Schedule E/F, I                       |   |
|                     |   |                               |                           | ☐ Schedule G, lin                       | e   |
|                     | umber Street  | •                             |                           | _                                       |   |
| Cit                 | ty  | State                         | ZIP Code                  |   |   |

Schedule H: Your Codebtors

| <b>-</b> :::: | :  |                             |                                  |    |     | 1       |                |            |                                |      |
|---------------|--|-----------------------------|----------------------------------|----|-----|---------|----------------|------------|--------------------------------|------|
|               | in this information to identify your   |                             |                                  |    |     |         |                |            |                                |      |
| Dei           | otor 1 Keith Lee   | barton                      |                                  |    |     |         |                |            |                                |      |
|               | btor 2  buse, if filing)   |                             |                                  |    | _   |         |                |            |                                |      |
| Uni           | ited States Bankruptcy Court for the   | ne: SOUTHERN DISTRIC        | CT OF MISSISSIPE                 | Pl |     |         |                |            |                                |      |
| Cas           | se number  |                             | _                                |    |     | Ch      | eck if this is | :          |                                |      |
| (If kr        | nown)  |                             |                                  |    |     |         | An amende      | ed filing  |                                |      |
|               |  |                             |                                  |    |     |         |                |            | ng postpetition ollowing date: |      |
| <u>O</u>      | fficial Form 106I  |                             |                                  |    |     |         | MM / DD/ Y     | YYYY       |                                |      |
| S             | chedule I: Your Inc  | come                        |                                  |    |     |         |                |            |                                | 12/1 |
| atta          | use. If you are separated and you had separate sheet to this form  The separate sheet to this form  The separate sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to this form  The separated and your employment sheet to the separated and | n. On the top of any additi |                                  |    |     |         |                |            |                                |      |
| ١.            | information.   |                             | Debtor 1                         |    |     |         | Debtor :       | 2 or non-f | iling spouse                   |      |
|               | If you have more than one job, attach a separate page with   | Employment status           | ■ Employed                       |    |     |         | ☐ Empl         | •          |                                |      |
|               | information about additional employers.  |                             | ☐ Not employed                   |    |     | ☐ Not e | mployed        |            |                                |      |
|               |  | Occupation                  | Attonrey                         |    |     |         |                |            |                                |      |
|               | Include part-time, seasonal, or self-employed work.  | Employer's name             | Self                             |    |     |         |                |            |                                |      |
|               | Occupation may include studen or homemaker, if it applies.   | t Employer's address        | 13 Bridgefield<br>Hattiesburg, I |    |     |         |                |            |                                |      |
|               |  | How long employed t         | here? 2 yrs                      | •  |     |         |                |            |                                |      |
| Pai           | rt 2: Give Details About M   | onthly Income               |                                  |    |     |         |                |            |                                |      |
| spoo<br>If yo | mate monthly income as of the use unless you are separated. ou or your non-filing spouse have a space, attach a separate sheet   | more than one employer, co  | ,                                | ·  | Í   |         |                | ·          | •                              | J    |
|               |  |                             |                                  |    |     | For D   | ebtor 1        |            | btor 2 or<br>ing spouse        |      |
| 2.            | List monthly gross wages, sa deductions). If not paid monthly  |                             |                                  | 2. | \$  |         | 8,000.00       | \$         | N/A                            |      |
| 3.            | Estimate and list monthly over   | ertime pay.                 |                                  | 3. | +\$ |         | 0.00           | +\$        | N/A                            |      |
| 4.            | Calculate gross Income. Add  | line 2 + line 3.            |                                  | 4. | \$  | 8,      | 000.00         | \$         | N/A                            |      |

| Deb | otor 1                      | Keith Lee Barton  | -          | Cas   | e number (if kn | own)  | -         |                                |            |
|-----|-----------------------------|---|------------|-------|-----------------|-------|-----------|--------------------------------|------------|
|     |                             |   |            | Fo    | or Debtor 1     |       |           | Debtor 2 or<br>a-filing spouse |            |
|     | Cop                         | by line 4 here  | 4.         | \$    | 8,000           | .00   | \$        | N/A                            | <u>4</u>   |
| 5.  | List                        | all payroll deductions:   |            |       |                 |       |           |                                |            |
|     | 5a.                         | Tax, Medicare, and Social Security deductions   | 5a.        | . \$  | 1,840           | 00    | \$        | N/A                            | 1          |
|     | 5b.                         | Mandatory contributions for retirement plans  | 5b.        |       | -               | .00   | \$_       | N/A                            |            |
|     | 5c.                         | Voluntary contributions for retirement plans  | 5c.        |       |                 | .00   | \$        | N/A                            |            |
|     | 5d.                         | Required repayments of retirement fund loans  | 5d.        | . \$  | 0               | .00   | \$        | N/A                            |            |
|     | 5e.                         | Insurance   | 5e.        | . \$  | 0               | .00   | \$        | N/A                            | 1          |
|     | 5f.                         | Domestic support obligations  | 5f.        |       | 6,000           | .00   | \$        | N/A                            |            |
|     | 5g.                         | Union dues  | 5g.        |       |                 | .00   | \$_       | N/A                            |            |
|     | 5h.                         | Other deductions. Specify:  | 5h.        | .+ \$ | 0               | .00   | + \$_     | N/A                            | 4          |
| 6.  | Add                         | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.         | \$    | 7,840           | .00   | \$_       | N/A                            | <u>\</u>   |
| 7.  | Cal                         | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$    | 160             | .00   | \$_       | N/A                            | <u>\</u>   |
| 8.  | List<br>8a.                 | t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income. | 90         | . \$  | 0               | 00    | ¢         | N//                            |            |
|     | 8b.                         | monthly net income.  Interest and dividends   | 8a.<br>8b. | ٠.    |                 | .00   | \$_<br>\$ | N/A<br>N/A                     |            |
|     | 8c.                         | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce   |            | . Ψ   | 0               | .00   | Ψ_        | IN/F                           | <u>1</u>   |
|     |                             | settlement, and property settlement.  | 8c.        |       |                 | .00   | \$_       | N/A                            |            |
|     | 8d.                         | . , .   | 8d.        |       |                 | .00   | \$_       | N/A                            |            |
|     | 8e.                         | Social Security   | 8e.        | . \$  | 0               | .00   | \$        | N/A                            | <u> </u>   |
|     | 8f.                         | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:           | e<br>8f.   | \$    | 0               | .00   | \$        | N/A                            | A.         |
|     | 8g.                         | Pension or retirement income  | 8g.        | ٠.    |                 | .00   | \$_       | N/ <i>A</i>                    |            |
|     | 8h.                         | Other monthly income. Specify:  | 8h.        |       | 0               | .00   | + \$_     | N/A                            |            |
| 9.  | Add                         | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$_   | 0               | .00   | \$_       | N/                             | <b>/</b> A |
| 10. | Cal                         | culate monthly income. Add line 7 + line 9.   | 10.        | \$    | 160.00          | + \$  |           | N/A = \$                       | 160.00     |
|     |                             | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |            |       | 100.00          | -   * |           | - TOTAL   -                    | 100.00     |
| 11. | Star<br>Incl<br>other<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not exify:         | depe       |       | , ,             |       | ,         | Schedule J.<br>11. +\$         | 0.00       |
| 12. |                             | d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies  |            |       |                 |       |           | . 12. \$ <b>Comb</b>           | 160.00     |
| 13. | Do                          | you expect an increase or decrease within the year after you file this form No.   | ?          |       |                 |       |           |                                | nly income |
|     | _                           | Yes. Explain:   |            |       |                 |       |           |                                |            |

|       | in this informa            | tion to identify                   | our cooci                   |   |  |              |  |                               |       |
|-------|----------------------------|------------------------------------|-----------------------------|---|--|--------------|--|-------------------------------|-------|
|       |                            | ition to identify yo               | our case:                   |   |  |              |  |                               |       |
| Deb   | tor 1                      | Keith Lee Ba                       | arton                       |   |  |              | k if this is:                          |                               |       |
| Deb   | tor 2                      |                                    |                             |   |  | _            | An amended filing<br>A supplement shov | ving postpetition chap        | ter   |
| (Spc  | ouse, if filing)           |                                    |                             |   |  | _            | 13 expenses as of                      |                               |       |
| Unite | ed States Bankr            | ruptcy Court for the               | : SOUTH                     | IERN DISTRICT OF MISS   | SSIPPI                                   | Ī            | MM / DD / YYYY                         |                               |       |
| l     | e number<br>nown)          |                                    |                             |   |  |              |  |                               |       |
| Of    | fficial Fo                 | rm 106J                            |                             |   |  |              |  |                               |       |
| Sc    | chedule                    | J: Your                            | Exper                       | ises  |  |              |  | •                             | 12/15 |
| info  | rmation. If m              |                                    | eded, atta                  | . If two married people ar<br>ich another sheet to this t<br>n.           |  |              |  |                               |       |
| Part  |                            | ribe Your House                    | hold                        |   |  |              |  |                               |       |
| 1.    | Is this a joir             | nt case?                           |                             |   |  |              |  |                               |       |
|       | ■ No. Go to                |                                    | in a separ                  | ate household?  |  |              |  |                               |       |
|       | □N                         |                                    |                             |   |  |              |  |                               |       |
|       |                            |                                    | st file Offici              | al Form 106J-2, Expenses  | for Separate House                       | hold of Debt | or 2.                                  |                               |       |
| 2.    | Do you have                | e dependents?                      | ■ No                        |   |  |              |  |                               |       |
|       | Do not list D<br>Debtor 2. | ebtor 1 and                        | ☐ Yes.                      | Fill out this information for each dependent                              | Dependent's relati<br>Debtor 1 or Debtor |              | Dependent's age                        | Does dependent live with you? |       |
|       | Do not state               | the                                |                             |   |  |              |  | □ No                          |       |
|       | dependents                 | names.                             |                             |   |  |              |  | ☐ Yes                         |       |
|       |                            |                                    |                             |   |  |              |  | □ No                          |       |
|       |                            |                                    |                             |   |  |              | · ———                                  | ☐ Yes<br>☐ No                 |       |
|       |                            |                                    |                             |   |  |              |  | □ No<br>□ Yes                 |       |
|       |                            |                                    |                             |   |  |              |  | □ res                         |       |
|       |                            |                                    |                             |   |  |              |  | □ Yes                         |       |
| 3.    |                            | oenses include                     |                             | No  |  |              |  |                               |       |
|       |                            | f people other t<br>d your depende | han $_{oldsymbol{\square}}$ | Yes   |  |              |  |                               |       |
| Dow   |                            |                                    |                             |   |  |              |  |                               |       |
| exp   | imate your ex              |                                    | our bankr                   | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |  |              |  |                               |       |
| the   | value of sucl              | h assistance an                    |                             | government assistance it  |  |              | Your exp                               | enses                         |       |
| ווטו  | ficial Form 10             | <i>7</i> 01. <i>j</i>              |                             |   |  |              | . car exp                              |                               |       |
| 4.    |                            | or home owners                     |                             | ses for your residence. In  | nclude first mortgage                    | 4. \$        |  | 0.00                          |       |
|       | If not includ              | led in line 4:                     |                             |   |  |              |  |                               |       |
|       | 4a. Real e                 | estate taxes                       |                             |   |  | 4a. \$       |  | 0.00                          |       |
|       |                            | rty, homeowner's                   | s, or renter                | 's insurance  |  | 4b. \$       | -                                      | 0.00                          |       |
|       | 4c. Home                   | maintenance, re                    | epair, and ι                | upkeep expenses   |  | 4c. \$       |  | 0.00                          |       |
| _     |                            | owner's associat                   |                             |   |  | 4d. \$       |  | 0.00                          |       |
| 5.    | Additional r               | mortgage payme                     | ents for vo                 | <b>our residence</b> , such as ho   | me equity loans                          | 5. \$        |  | 0.00                          |       |

| ebtor        | 1 Keith Lee Barton   | Case num     | ber (if known) |                       |
|--------------|--|--------------|----------------|-----------------------|
| 6. <b>U</b>  | tilities:  |              |                |                       |
| ). <b>G</b>  |  | 6a.          | \$             | 0.00                  |
| 61           | •  | 6b.          | · ·            | 0.00                  |
| 60           |  | 6c.          | \$             | 0.00                  |
| 60           |  | 6d.          | \$             | 0.00                  |
| _            | pod and housekeeping supplies  | 7.           | ·              | 0.00                  |
|              | hildcare and children's education costs  | 8.           | \$             | 0.00                  |
| _            | othing, laundry, and dry cleaning  | 9.           | \$             | 0.00                  |
|              | ersonal care products and services   | 10.          | \$<br>         |                       |
|              | edical and dental expenses   | 11.          | \$             | 0.00                  |
|              | •  | 11.          | Φ              | 0.00                  |
|              | ransportation. Include gas, maintenance, bus or train fare. o not include car payments.                      | 12.          | \$             | 0.00                  |
|              | ntertainment, clubs, recreation, newspapers, magazines, and books  | 13.          | \$             | 0.00                  |
|              | naritable contributions and religious donations  | 14.          | · ———          | 0.00                  |
|              | surance.   | 17.          | Ψ              | 0.00                  |
| -            | o not include insurance deducted from your pay or included in lines 4 or 20.                                 |              |                |                       |
|              | 5a. Life insurance   | 15a.         | \$             | 0.00                  |
|              | bb. Health insurance   | 15b.         | ·              | 0.00                  |
|              | 5c. Vehicle insurance  | 15c.         | ·              | 0.00                  |
|              | 5d. Other insurance. Specify:  | 15d.         | *              | 0.00                  |
|              | axes. Do not include taxes deducted from your pay or included in lines 4 or 20.                              |              | Ψ              | 0.00                  |
|              | pecify:  | 16.          | \$             | 0.00                  |
| 7. In        | stallment or lease payments:   |              |                |                       |
| 17           | 'a. Car payments for Vehicle 1   | 17a.         | \$             | 0.00                  |
| 17           | b. Car payments for Vehicle 2  | 17b.         | \$             | 0.00                  |
| 17           | c. Other. Specify:   | 17c.         | \$             | 0.00                  |
| 17           | d. Other. Specify:   | 17d.         | \$             | 0.00                  |
|              | our payments of alimony, maintenance, and support that you did not report as                                 | 18.          | •              | 0.00                  |
|              | educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).                               | 10.          | · -            | -                     |
|              | ther payments you make to support others who do not live with you.   | 40           | \$             | 0.00                  |
|              | pecify:  | 19.          |                |                       |
|              | ther real property expenses not included in lines 4 or 5 of this form or on Sche                             | 20a.         |                | 0.00                  |
|              |  | 20a.<br>20b. | ·              |                       |
|              | b). Real estate taxes  |              | ·              | 0.00                  |
|              | Oc. Property, homeowner's, or renter's insurance   | 20c.         |                | 0.00                  |
|              | d. Maintenance, repair, and upkeep expenses  | 20d.         |                | 0.00                  |
|              | De. Homeowner's association or condominium dues  | 20e.         | ·              | 0.00                  |
| 1. <b>O</b>  | ther: Specify:   | 21.          | +\$            | 0.00                  |
| 2. <b>C</b>  | alculate your monthly expenses   |              |                |                       |
| 22           | 2a. Add lines 4 through 21.  |              | \$             | 0.00                  |
| 22           | 2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2                          |              | \$             |                       |
|              | 2c. Add line 22a and 22b. The result is your monthly expenses.   |              | \$             | 0.00                  |
|              |  |              |                | <u> </u>              |
|              | alculate your monthly net income.  |              |                |                       |
|              | Ba. Copy line 12 (your combined monthly income) from Schedule I.   | 23a.         |                | 160.00                |
| 23           | Bb. Copy your monthly expenses from line 22c above.  | 23b.         | -\$            | 0.00                  |
| ٥,           | Cubtract your monthly avanage from   |              |                |                       |
| 2            | 8c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> . | 23c.         | \$             | 160.00                |
|              | The result is your monthly net income.   | _00.         | ·              |                       |
| 24. <b>D</b> | o you expect an increase or decrease in your expenses within the year after yo                               | ou file this | form?          |                       |
| Fo           | or example, do you expect to finish paying for your car loan within the year or do you expect you            |              |                | decrease because of a |
|              | odification to the terms of your mortgage?   |              |                |                       |
|              | No   |              |                |                       |
| Г            | Yes Explain here:  |              |                |                       |

| Fill in this info               | ormation to identify your  | case:                     |                                |  |
|---------------------------------|----------------------------|---------------------------|--------------------------------|--|
| Debtor 1                        | Keith Lee Barton           |                           |                                |  |
|                                 | First Name                 | Middle Name               | Last Name                      |  |
| Debtor 2<br>(Spouse if, filing) | First Name                 | Middle Name               | Last Name                      |  |
| (Spouse II, IIIIIIg)            | First Name                 | Middle Name               | Last Name                      |  |
| United States E                 | Bankruptcy Court for the:  | SOUTHERN DISTRIC          | T OF MISSISSIPPI               |  |
| Case number                     |                            |                           |                                |  |
| (if known)                      |                            |                           |                                | ☐ Check if this is an                            |
|                                 |                            |                           |                                | amended filing                                   |
|                                 |                            |                           |                                |  |
| Official Ear                    | rm 106Daa                  |                           |                                |  |
|                                 | rm 106Dec                  |                           |                                |  |
| Declara                         | ition About a              | in Individual             | l Debtor's Sche                | edules 12/15                                     |
|                                 |                            |                           |                                |  |
| f two married                   | people are filing togethe  | r, both are equally respo | onsible for supplying correct  | information.                                     |
| You must file th                | his form whenever you fi   | le bankruptcy schedule    | s or amended schedules. Ma     | king a false statement, concealing property, or  |
| obtaining mon                   | ey or property by fraud in | n connection with a ban   |                                | es up to \$250,000, or imprisonment for up to 20 |
| years, or both.                 | 18 U.S.C. §§ 152, 1341, 1  | 519, and 3571.            |                                |  |
|                                 |                            |                           |                                |  |
| Si                              | gn Below                   |                           |                                |  |
| 9.                              |                            |                           |                                |  |
| Did vou p                       | pay or agree to pay some   | one who is NOT an atto    | rney to help you fill out bank | ruptcy forms?                                    |
| ,,                              | ,                          |                           | <b>,</b>                       |  |
| ■ No                            |                            |                           |                                |  |
| П Yes.                          | Name of person             |                           |                                | Attach Bankruptcy Petition Preparer's Notice,    |
|                                 |                            |                           |                                | Declaration, and Signature (Official Form 119)   |
|                                 |                            |                           |                                |  |
| Under ner                       | alty of periury I declare  | that I have read the cur  | nmary and schedules filed wi   | th this declaration and                          |
|                                 | are true and correct.      | that I have read the Sun  | illiary and schedules med wi   | ur uris declaration and                          |
| X /s/ Ke                        | eith Lee Barton            |                           | X                              |  |
| Keith                           | Lee Barton                 |                           | Signature of Deb               | tor 2  |
| Signat                          | ture of Debtor 1           |                           |                                |  |
| Date                            | April 4 2017               |                           | Date                           |  |
| Date                            | April 4, 2017              |                           |                                |  |
|                                 |                            |                           |                                |  |

| Fi     | II in this inforn | nation to identify you   | ır case:                                   |  |  |   |
|--------|-------------------|--------------------------|--|--|--|---|
| De     | ebtor 1           | Keith Lee Barto          |  | Leat News  |  |   |
| De     | ebtor 2           | First Name               | Middle Name                                | Last Name  |  |   |
| 1      | oouse if, filing) | First Name               | Middle Name                                | Last Name  |  |   |
| Ur     | nited States Bar  | nkruptcy Court for the   | SOUTHERN DISTRICT                          | OF MISSISSIPPI   |  |   |
| Ca     | ase number        |                          |  |  |  |   |
| (if I  | known)            |                          |  |  | _  | check if this is an                                   |
|        |                   |                          |  |  | a  | mended filing   |
| $\sim$ | fficial Fo        | rm 107                   |  |  |  |   |
|        | fficial Fo        |                          | Affairs for Indivi                         | duals Filing for B   | ankruntov                                  | 4/16  |
|        |                   |                          |  |  | equally responsible for sup                |   |
| inf    | ormation. If m    | ore space is needed      | , attach a separate sheet to               |  | additional pages, write you                |   |
| nu     | mber (if knowr    | n). Answer every que     | stion.                                     |  |  |   |
| Pa     | art 1: Give D     | Details About Your M     | arital Status and Where Yo                 | u Lived Before   |  |   |
| 1.     | What is you       | r current marital stat   | us?  |  |  |   |
|        | ■ Married         |                          |  |  |  |   |
|        | □ Not mar         |                          |  |  |  |   |
| 2.     | During the la     | ast 3 vears. have vou    | lived anywhere other than                  | where you live now?  |  |   |
|        | _                 | , , ,                    |  |  |  |   |
|        | □ No ■ Yes Lie    | at all of the places you | lived in the last 2 years. Do r            | not include where you live now   | ,  |   |
|        | Tes. Lis          | it all of the places you | lived in the last 5 years. Do r            | lot include where you live now   |  |   |
|        | Debtor 1 Pr       | ior Address:             | Dates Debtor 1 lived there                 | Debtor 2 Prior Ad  | dress:                                     | Dates Debtor 2<br>lived there                         |
|        |                   | tuary Place              | From-To:                                   | ☐ Same as Debtor 1   |  | ☐ Same as Debtor 1                                    |
|        | Brentwoo          | d, TN 37021              | 2014                                       |  |  | From-To:  |
|        | 1000 Encl         | ave Circle               | From-To:                                   | ☐ Same as Debtor 1   |  | ☐ Same as Debtor 1                                    |
|        | Nashville,        | TN 37211                 | 2015                                       |  |  | From-To:  |
|        |                   |                          |  |  |  |   |
| 3.     | Within the Is     | est 8 years, did you e   | ver live with a spouse or le               | gal equivalent in a commun   | ity property state or territory            | 12 (Community property                                |
|        |                   |                          |  |  | co, Texas, Washington and W                |   |
|        | ■ No              |                          |  |  |  |   |
|        | _                 | ake sure you fill out So | hedule H: Your Codebtors (C                | Official Form 106H).   |  |   |
|        |                   |                          |  |  |  |   |
| Pā     | ert 2 Explai      | in the Sources of You    | ur Income                                  |  |  |   |
| 4.     | Fill in the tota  | al amount of income yo   | ou received from all jobs and              | ng a business during this ye<br>all businesses, including part-<br>ve together, list it only once ur |  | ndar years?   |
|        | _                 | •                        | •  | -  |  |   |
|        |                   | I in the details.        |  |  |  |   |
|        | — 165. FIII       | i iii iiie ueidiis.      |  |  |  |   |
|        |                   |                          | Debtor 1                                   |  | Debtor 2                                   |   |
|        |                   |                          | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

| Debto  | r1 <u>K</u> e     | eith Lee Ba             | arton           |   |               | Ca  | ase number ( <i>if known</i> )   |                                     |   |  |
|--------|-------------------|-------------------------|-----------------|---|---------------|---|----------------------------------|-------------------------------------|---|--|
|        |                   |                         |                 |   |               |   |                                  |                                     |   |  |
|        |                   |                         |                 | Debtor 1  |               |   | Debtor 2                         |                                     |   |  |
|        |                   |                         |                 | Sources of income<br>Check all that apply.  | (befo         | ss income<br>ore deductions and<br>usions)                  | Sources of inc                   |                                     | Gross income<br>(before deductions<br>and exclusions) |  |
|        |                   | ndar year:<br>December  | 31, 2016 )      | ■ Wages, commissions, bonuses, tips   |               | \$112,000.00  | ☐ Wages, conbonuses, tips        | ☐ Wages, commissions, bonuses, tips |   |  |
|        |                   |                         |                 | ☐ Operating a business  |               |   | ☐ Operating a                    | business                            |   |  |
|        |                   | dar year be<br>December |                 | ■ Wages, commissions, bonuses, tips   |               | \$27,894.00   | ☐ Wages, con<br>bonuses, tips    | nmissions,                          |   |  |
|        |                   |                         |                 | ☐ Operating a business  |               |   | ☐ Operating a                    | business                            |   |  |
| W      | innings. ist each | If you are fili         | ing a joint cas | pensions; rental income; in<br>se and you have income that<br>ome from each source sepa     | at you rece   | eived together, list i                                      | t only once under D              | ebtor 1.                            | 3 3   |  |
|        |                   |                         |                 | Debtor 1  |               |   | Debtor 2                         |                                     |   |  |
|        |                   |                         |                 | Sources of income Describe below.   | each<br>(befo | ss income from<br>a source<br>ore deductions and<br>usions) | Sources of inc<br>Describe below |                                     | Gross income<br>(before deductions<br>and exclusions) |  |
| Part 3 | Lis               | t Certain Pa            | yments You      | Made Before You Filed fo  | or Bankru     | ptcy  |                                  |                                     |   |  |
|        |                   |                         |                 | 's debts primarily consun   |               |   |                                  |                                     |   |  |
|        | No.               | Neither De              | ebtor 1 nor E   | Debtor 2 has primarily con<br>personal, family, or housel                                   | sumer de      | ebts. Consumer de   | bts are defined in 1°            | U.S.C. § 10                         | 1(8) as "incurred by an                               |  |
|        |                   | During the No.          | 90 days befo    | ore you filed for bankruptcy,   | did you p     | ay any creditor a to  | otal of \$6,425* or mo           | re?                                 |   |  |
|        |                   | □ Yes                   | paid that cr    | each creditor to whom you peditor. Do not include payme payments to an attorney fo          | nents for d   | omestic support ob  |                                  |                                     |   |  |
|        |                   | * Subject               | to adjustmen    | t on 4/01/19 and every 3 ye   | ars after t   | nat for cases filed o                                       | on or after the date             | of adjustment                       |   |  |
|        | Yes.              |                         |                 | or both have primarily con<br>ore you filed for bankruptcy,                                 |               |   | tal of \$600 or more             | ?                                   |   |  |
|        |                   | □ No. □ Yes             | include pay     | r.<br>each creditor to whom you p<br>rments for domestic support<br>r this bankruptcy case. |               |   |                                  |                                     |   |  |
| (      | Creditor          | 's Name and             | d Address       | Dates of payr   | ment          | Total amount  | Amount you                       | Was this p                          | payment for   |  |
|        |                   |                         |                 |   |               | paid  | still owe                        |                                     |   |  |

| Deb | btor 1 Keith Lee Barton  |   | Cas   | se number (if known)                        |                                  |  |
|-----|--|---|---|---|----------------------------------|--|
|     |  |   |   |   |                                  |  |
| 7.  | Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general pof which you are an officer, director, person is a business you operate as a sole proprietor, alimony. | partners; relatives of any gen<br>in control, or owner of 20% o | eral partners; partners r more of their voting        | erships of which yo<br>g securities; and ar | u are a genera<br>ny managing ag | I partner; corporation<br>gent, including one fo |
|     | <ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>   |   |   |   |                                  |  |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid                                     | Amount you still owe                        | Reason for                       | this payment                                     |
| 8.  | Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co   |   | ments or transfer a                                   | any property on a                           | ccount of a de                   | bt that benefited an                             |
|     | <ul><li>No</li><li>Yes. List all payments to an insider</li></ul>  |   |   |   |                                  |  |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid                                     | Amount you still owe                        | Reason for t                     | this payment<br>tor's name                       |
| Par | rt 4: Identify Legal Actions, Repossession   | ons. and Foreclosures   |   |   |                                  |  |
| 9.  | Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.   |   |   |   |                                  |  |
|     | Case title Case number   | Nature of the case  | Court or agency                                       |   | Status of the                    | e case   |
|     | Mobile Echocardiography, Inc.<br>v. Keith L. Barton, and<br>Gregory, Barton & Swapp, PC<br>090908441   | Collection  | Third Judicial I<br>Salt Lake Cour<br>Salt Lake City, | nty   | ■ Pending □ On appea □ Conclude  |  |
| 10. | Within 1 year before you filed for bankrup Check all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.  |   | erty repossessed, f                                   | oreclosed, garnis                           | hed, attached                    | , seized, or levied?                             |
|     | Creditor Name and Address  | Describe the Property   |   | Date  |                                  | Value of the<br>property                         |
|     |  | Explain what happened   |   |   |                                  |  |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment be  No Yes. Fill in the details.   |   | luding a bank or fir                                  | nancial institution                         | , set off any a                  | mounts from your                                 |
|     | Creditor Name and Address  | Describe the action the   | creditor took   | Date taken                                  | action was                       | Amount   |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or  ■ No □ Yes   |   | erty in the possess                                   | ion of an assigne                           | e for the bene                   | fit of creditors, a                              |

| Deb | otor 1       | Keith Lee Barton   |            | Case number (if known)  |                                   |                        |  |  |  |
|-----|--------------|--|------------|---|-----------------------------------|------------------------|--|--|--|
|     |              |  |            |   |                                   |                        |  |  |  |
| Par | t 5:         | List Certain Gifts and Contribution  | ns         |   |                                   |                        |  |  |  |
| 13. | Withi        | n 2 years before you filed for bankı   | ruptcy, d  | lid you give any gifts with a total value of more t   | han \$600 per person              | ?                      |  |  |  |
|     | ■ No         |  |            |   |                                   |                        |  |  |  |
|     |              | Yes. Fill in the details for each gift.  |            |   |                                   |                        |  |  |  |
|     |              | s with a total value of more than \$60<br>person   | •          |   | Dates you gave the gifts          | Value                  |  |  |  |
|     |              | son to Whom You Gave the Gift and ress:  | i          |   |                                   |                        |  |  |  |
| 14. | _            | n 2 years before you filed for bankı<br>No   | ruptcy, d  | lid you give any gifts or contributions with a tota   | ıl value of more than             | \$600 to any charity?  |  |  |  |
|     |              | Yes. Fill in the details for each gift or o  | contributi | on.   |                                   |                        |  |  |  |
|     | more<br>Char | s or contributions to charities that<br>e than \$600<br>rity's Name<br>ress (Number, Street, City, State and ZIP Cod |            | Describe what you contributed   | Dates you contributed             | Value                  |  |  |  |
| Par | t 6:         | List Certain Losses  |            |   |                                   |                        |  |  |  |
|     | ■ 1          | mbling?  No  Yes. Fill in the details.   |            |   |                                   |                        |  |  |  |
|     |              | cribe the property you lost and the loss occurred  | Include    | the amy insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property. | Date of your loss                 | Value of property lost |  |  |  |
|     |              |  |            | ice claims on line 33 or <i>3chedule A/B. Froperty.</i>   |                                   |                        |  |  |  |
| Par | t 7:         | List Certain Payments or Transfer  | S          |   |                                   |                        |  |  |  |
| 16. |              | ulted about seeking bankruptcy or  | preparir   | d you or anyone else acting on your behalf pay on going a bankruptcy petition? s, or credit counseling agencies for services required     |                                   | rty to anyone you      |  |  |  |
|     | Addı<br>Ema  | on Who Was Paid<br>ress<br>ill or website address<br>on Who Made the Payment, if Not \                               | You        | Description and value of any property transferred   | Date payment or transfer was made | Amount of payment      |  |  |  |
|     | P.O.<br>Jack | en N. Shaffer<br>. Box 1177<br>kson, MS 39215<br>law@bellsouth.net   |            |   |                                   | \$5,000.00             |  |  |  |
|     | P.O.<br>Jack | en N. Shaffer<br>. Box 1177<br>kson, MS 39215<br>law@bellsouth.net   |            |   | 4/4/17                            | \$5,000.00             |  |  |  |

Case number (if known)

| 17.  | Within 1 year before you filed for bankruptcy<br>promised to help you deal with your credito<br>Do not include any payment or transfer that you   | rs or to make payments  |                               |                 | transfer any proper                             | ty to anyone who                           |  |
|--|---|---|-------------------------------|-----------------|---|--|--|
|  | ■ No □ Yes. Fill in the details.  |   |                               |                 |   |  |  |
|  | Person Who Was Paid<br>Address  | Description and v<br>transferred                                | alue of any prope             | erty            | Date payment or transfer was made               | Amount o                                   |  |
| 18.  | Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread  No Yes. Fill in the details.   | usiness or financial affa<br>ade as security (such as t         | airs?<br>the granting of a se |                 |   |  |  |
|  | Person Who Received Transfer<br>Address   | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                           |                               |                 |   |  |  |
| 19.  | <ul> <li>19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of wh beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |   |                               |                 |   |  |  |
|  | Name of trust   | Description and v   | alue of the prope             | rty transferred | d   | Date Transfer was                          |  |
| Par  | 8: List of Certain Financial Accounts, Ins  | struments, Safe Deposit   | Boxes, and Stora              | age Units       |   | maao                                       |  |
| Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Ur  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments I sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of depo houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details. |   |   |                               |                 | •   | ,  |  |
|  | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  | Last 4 digits of account number                                 | count number instrument       |                 | e account was<br>ed, sold,<br>ed, or<br>sferred | Last balanc<br>before closing o<br>transfe |  |
| 21.  | Do you now have, or did you have within 1 y cash, or other valuables?  No Yes. Fill in the details.   | ear before you filed for  | bankruptcy, any               | safe deposit k  | oox or other deposi                             | tory for securities,                       |  |
|  | Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)   |   |                               |                 |   |  |  |
| 22.  | Have you stored property in a storage unit o  ■ No □ Yes. Fill in the details.  | or place other than your  | home within 1 ye              | ar before you   | filed for bankruptc                             | y?   |  |
|  | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or has to it? Address (Number, State and ZIP Code) |                               | escribe the co  | ontents   | Do you still have it?                      |  |

Debtor 1 Keith Lee Barton

Case number (if known)

| Pai | t 9:   | Identify Property You Hold or Control for  | Someone Else   |      |                                   |                    |  |  |
|-----|--|--|--|------|-----------------------------------|--------------------|--|--|
|     | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.                           |  |  |      |                                   |                    |  |  |
|     |  | No   |  |      |                                   |                    |  |  |
|     |  | Yes. Fill in the details.  |  |      |                                   |                    |  |  |
|     |  | vner's Name<br>Idress (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)  | De   | escribe the property              | Valu               |  |  |
| Pai | t 10   | Give Details About Environmental Inform  | ation  |      |                                   |                    |  |  |
| or  | the  | purpose of Part 10, the following definitions  | apply:   |      |                                   |                    |  |  |
|     | tox  | ic substances, wastes, or material into the a  | onmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or tions controlling the cleanup of these substances, wastes, or material. |      |                                   |                    |  |  |
|     |  | S <i>ite</i> means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use<br>to own, operate, or utilize it, including disposal sites. |  |      |                                   |                    |  |  |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic hazardous material, pollutant, contaminant, or similar term. |  |  |      |                                   | substance,         |  |  |
| ₹ер | ort a  | all notices, releases, and proceedings that ye   | ou know about, regardless of whe   | n th | ey occurred.                      |                    |  |  |
| 24. | Has  | las any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   |  |      |                                   |                    |  |  |
|     | ■ No   |  |  |      |                                   |                    |  |  |
|     |  | Yes. Fill in the details.  |  |      |                                   |                    |  |  |
|     |  | nme of site<br>Idress (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State at ZIP Code)  | nd   | Environmental law, if you know it | Date of notice     |  |  |
| 25. | Hav  | Have you notified any governmental unit of any release of hazardous material?  |  |      |                                   |                    |  |  |
|     | _  |  |  |      |                                   |                    |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |  |      |                                   |                    |  |  |
|     | _  | me of site   | Governmental unit  |      | Environmental law, if you         | Date of notice     |  |  |
|     |  | Idress (Number, Street, City, State and ZIP Code)  | Address (Number, Street, City, State at ZIP Code)  | nd   | know it                           | Date of Hotice     |  |  |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  |  |  |      |                                   |                    |  |  |
|     | ■ No   |  |  |      |                                   |                    |  |  |
|     |  | Yes. Fill in the details.  |  |      |                                   |                    |  |  |
|     |  | ise Title<br>ise Number  | Court or agency<br>Name<br>Address (Number, Street, City,  | Na   | ature of the case                 | Status of the case |  |  |
|     |  |  | State and ZIP Code)  |      |                                   |                    |  |  |
| Pai | t 11   | Give Details About Your Business or Con  | nections to Any Business   |      |                                   |                    |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   |  |  |      |                                   |                    |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  |  |  |      |                                   |                    |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |  |      |                                   |                    |  |  |
|     | ☐ A partner in a partnership   |  |  |      |                                   |                    |  |  |
|     | ☐ An officer, director, or managing executive of a corporation   |  |  |      |                                   |                    |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |  |      |                                   |                    |  |  |

Official Form 107

Debtor 1 Keith Lee Barton

Case number (if known)

| ■ No. None of the above applies. Go to   | Part 12.  |   |  |  |  |  |
|--|---|---|--|--|--|--|
| Yes. Check all that apply above and fill in the details below for each business.   |   |   |  |  |  |  |
| Business Name<br>Address<br>(Number, Street, City, State and ZIP Code)   | Describe the nature of the business  Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN.  Dates business existed |  |  |  |  |
| Keith Barton & Assoc. of Arizona   | Legal   | EIN:<br>From-To -present  |  |  |  |  |
| Tyfon I, LLC   | No Operating Agreement<br>Never operated                              | EIN:  |  |  |  |  |
|  |   | From-To   |  |  |  |  |
| Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No Yes. Fill in the details below. |   |   |  |  |  |  |
| Name Address (Number, Street, City, State and ZIP Code)  | Date Issued   |   |  |  |  |  |

Debtor 1 Keith Lee Barton

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| Debtor 1             | Keith Lee Barto             | on   | Case number (if known)  |
|----------------------|-----------------------------|--|---|
| Part 12:             | Sign Below                  |  |   |
| are true a with a ba | and correct. I under        | stand that making a false statement, concealing result in fines up to \$250,000, or imprisonment | chments, and I declare under penalty of perjury that the answers g property, or obtaining money or property by fraud in connection for up to 20 years, or both. |
| /s/ Keitl            | h Lee Barton                |  |   |
|                      | ee Barton<br>re of Debtor 1 | Signature of Deb   | tor 2   |
| Date A               | April 4, 2017               | Date   |   |
| Did you a ■ No □ Yes | attach additional pa        | ges to Your Statement of Financial Affairs for   | Individuals Filing for Bankruptcy (Official Form 107)?  |
| Did you p            | pay or agree to pay         | someone who is not an attorney to help you fi  | I out bankruptcy forms?   |
| ∏ Yes N              | lame of Person              | Attach the Bankruntcy Petition Preparer's Noti   | ce Declaration and Signature (Official Form 119)  |

| Fill in this infor  | rmation to identify your cas                         | e:               |   |   |
|---------------------|--|------------------|---|---|
| Debtor 1            | Keith Lee Barton                                     |                  |   |   |
| Debter 1            | First Name   | Middle Name      | Last Name   |   |
| Debtor 2            |  |                  |   |   |
| (Spouse if, filing) | First Name   | Middle Name      | Last Name   |   |
| United States Ba    | ankruptcy Court for the: S                           | OUTHERN DIS      | TRICT OF MISSISSIPPI  |   |
| Case number         |  |                  |   |   |
| (if known)          |  | -                |   | ☐ Check if this is an                               |
|                     |  |                  |   | amended filing                                      |
|                     |  |                  |   |   |
| Official Fo         | orm 108  |                  |   |   |
|                     |  | C 1 1'-          | danala Ella a Unadan Obasata  | <b></b>   |
| Stateme             | nt of Intention                                      | tor indiv        | riduals Filing Under Chapte   | er / 12/15  |
|                     |  |                  |   |   |
|                     | dividual filing under chapter                        |                  | I out this form if:   |   |
| _                   | ve claims secured by your p                          |                  |   |   |
| -                   | sed personal property and                            |                  |   | 4.641   |
|                     |  |                  | you file your bankruptcy petition or by the date se<br>e time for cause. You must also send copies to the |   |
| on the              |  |                  |   |   |
| If two married n    | eonle are filing together in                         | a joint case, ho | th are equally responsible for supplying correct in   | formation Both debtors must                         |
|                     | nd date the form.                                    | a joint case, be | in are equally responsible for supplying correct in   | Tormation. Both debtors must                        |
| Da aa aammiata      | and accounts as massible                             | lf               | a mandad attack a samanata abaat ta this fama. On   | the ten of any additional name                      |
|                     | and accurate as possible.  your name and case number |                  | s needed, attach a separate sheet to this form. On  | the top of any additional pages,                    |
|                     | ,  | (                |   |   |
| Part 1: List Y      | our Creditors Who Have So                            | ecured Claims    |   |   |
| 1 For any credit    | tors that you listed in Part                         | 1 of Schedule D  | : Creditors Who Have Claims Secured by Property   | (Official Form 106D), fill in the                   |
| information b       |  | . 0. 00000.0     | r crouncers with that's claims coodinal by r reporty  | (6  |
| Identify the cr     | reditor and the property that                        | is collateral    | What do you intend to do with the property that secures a debt?   | Did you claim the property as exempt on Schedule C? |
|                     |  |                  |   |   |
| Creditor's          |  |                  | ☐ Surrender the property.   | □ No  |
| name:               |  |                  | Retain the property and redeem it.  | □Yes  |
| Description of      | f  |                  | Retain the property and enter into a Reaffirmation Agreement.   | □ 1es   |
| property            |  |                  | ☐ Retain the property and [explain]:  |   |
| securing debt       | t:   |                  |   | _   |
| 0                   |  |                  | _   |   |
| Creditor's          |  |                  | ☐ Surrender the property.   | □ No  |
| name:               |  |                  | Retain the property and redeem it.  | □Yes  |
| Description of      | f  |                  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement.  | <b>L</b> 163  |
| property            |  |                  | ☐ Retain the property and [explain]:  |   |
| securing debt       | t:   |                  |   | _   |
| 0                   |  |                  | _   |   |
| Creditor's          |  |                  | ☐ Surrender the property.   | □ No  |
| name:               |  |                  | Retain the property and redeem it.  | □Yes  |
| Description of      | f  |                  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement.  | <b>—</b> 103  |
| property            |  |                  | ☐ Retain the property and [explain]:  |   |
| securing debt       | t:   |                  |   |   |

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ No

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| Debtor 1                  | Keith Lee Barton                         | Case number (if k  | nown)                                  |
|---------------------------|--|--|--|
| name:<br>Descrip          | tion of                                  | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a Reaffirmation Agreement.</li></ul> | ☐ Yes                                  |
| property                  | /  | Retain the property and [explain]:   |  |
| securin                   | g debt:                                  |  |  |
| For any ur<br>in the info | rmation below. Do not list real estate l | you listed in Schedule G: Executory Contracts and Une<br>eases. Unexpired leases are leases that are still in effec            | t; the lease period has not yet ended. |
| You may a                 | ssume an unexpired personal propert      | y lease if the trustee does not assume it. 11 U.S.C. § 365   | 5(p)(2).                               |
| Describe                  | your unexpired personal property leas    | ses  | Will the lease be assumed?             |
| Lessor's n                | ame:                                     |  | □ No                                   |
| Descriptio<br>Property:   | n of leased                              |  | ☐ Yes                                  |
| Lessor's n                | ame:                                     |  | □ No                                   |
|                           | n of leased                              |  |  |
| Property:                 |  |  | ☐ Yes                                  |
| Lessor's n                | ame:<br>n of leased                      |  | □ No                                   |
| Property:                 |  |  | ☐ Yes                                  |
| Lessor's n                |  |  | □ No                                   |
| Descriptio<br>Property:   | n of leased                              |  | ☐ Yes                                  |
| Lessor's n                | ame:                                     |  | □ No                                   |
|                           | n of leased                              |  | <u>_</u>                               |
| Property:                 |  |  | ☐ Yes                                  |
| Lessor's n                | ame:<br>n of leased                      |  | □ No                                   |
| Property:                 |  |  | ☐ Yes                                  |
| Lessor's n                | ame:<br>n of leased                      |  | □ No                                   |
| Property:                 |  |  | ☐ Yes                                  |

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| Den          | otor 1 Keith Lee Barton   | Case number (if known) |
|--------------|---|------------------------|
|              |   |                        |
|              |   |                        |
|              |   |                        |
|              |   |                        |
|              |   |                        |
|              |   |                        |
| Part         | t 3: Sign Below   |                        |
| Unde<br>prop | er penalty of perjury, I declare that I ha<br>perty that is subject to an unexpired lea                         |                        |
| Unde         | er penalty of perjury, I declare that I ha  | xX                     |
| Unde<br>prop | er penalty of perjury, I declare that I ha<br>perty that is subject to an unexpired lea                         | ).                     |
| Unde<br>prop | er penalty of perjury, I declare that I ha<br>perty that is subject to an unexpired lea<br>/s/ Keith Lee Barton | xX                     |

| Fill in                                   | this information to identify your case:   |  |   | as directed in this form and in                                       | Form                  |
|---|---|--|---|---|-----------------------|
| Debto                                     | Keith Lee Barton  |  | 2A-1Supp:                                   |   |                       |
| Debto<br>(Spouse                          | r 2<br>   |  | ■ 1. There is no                            | oresumption of abuse  |                       |
| United                                    | States Bankruptcy Court for the: Southern District of   | of Mississippi   | applies will                                | ion to determine if a presumpti<br>be made under <i>Chapter 7 Mea</i> |                       |
|   | number  |  | Calculation                                 | (Official Form 122A-2).   |                       |
| (if know                                  |   |  |   | Test does not apply now becau<br>litary service but it could apply    |                       |
|   |   |  | ☐ Check if this                             | is an amended filing  |                       |
| Offic                                     | cial Form 122A - 1  |  |   |   |                       |
| Cha                                       | pter 7 Statement of Your Cur  | rent Monthly Inc   | ome   |   | 12/15                 |
| attach a<br>case nu<br>qualifyi<br>Part 1 | ·   | which the additional information a<br>mapresumption of abuse becau<br>tion from Presumption of Abuse | applies. On the top<br>se you do not have   | of any additional pages, write your primarily consumer debts or be    | our name and cause of |
|   | Vhat is your marital and filing status? Check one on  | lly.   |   |   |                       |
|   | Not married. Fill out Column A, lines 2-11.   |  |   |   |                       |
| _   | ☐ Married and your spouse is filing with you. Fill ou   |  | 2-11.                                       |   |                       |
|   | ☐ Married and your spouse is NOT filing with you. `<br>—  | •  |   |   |                       |
|   | ☐ Living in the same household and are not lega   | •  | •   |   |                       |
|   | Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evadir   | egally separated under nonbar  | kruptcy law that a                          | pplies or that you and your spo                                       |                       |
| 101<br>the                                | in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that p  | onth period would be March 1 thro<br>by 6. Fill in the result. Do not include                        | ugh August 31. If the<br>de any income amou | amount of your monthly income value more than once. For example, if   | aried during<br>both  |
|   |   |  | Column A Debtor 1                           | Column B Debtor 2 or non-filing spouse                                |                       |
|   | our gross wages, salary, tips, bonuses, overtime, a payroll deductions).  | and commissions (before all  | \$  | \$  |                       |
|   | <b>Alimony and maintenance payments.</b> Do not include Column B is filled in.  | . ,  | \$  | \$  |                       |
| fi<br>a                                   | All amounts from any source which are regularly part you or your dependents, including child support. If you or your dependents, including child support or an unmarried partner, members of your household and roommates. Include regular contributions from a spulled in. Do not include payments you listed on line 3. | Include regular contributions I, your dependents, parents,   | \$  | \$  |                       |
|   | let income from operating a business, profession,   | or farm  |   | <u> </u>  |                       |
|   |   | Debtor 1   |   |   |                       |
|   | Gross receipts (before all deductions)  | \$   |   |   |                       |
|   | Ordinary and necessary operating expenses   | -\$  | _   |   |                       |
|   | let monthly income from a business, profession, or farr   | n \$ Copy here ->  | \$  | \$  |                       |
| 6. <b>N</b>                               | let income from rental and other real property  | Debtor 1   |   |   |                       |
| _   | Oraco receipto (hafore all de durations)  | \$   |   |   |                       |
|   | Gross receipts (before all deductions)  | -\$  |   |   |                       |
| İ   | Ordinary and necessary operating expenses  Net monthly income from rental or other real property  | \$ Copy here ->  | \$  | \$  |                       |
|   | nterest dividends and royalties   | Ψ  | \$  | \$  |                       |

Official Form 122A-1

| Debtor | 1 Keith Lee Barton  |  | Case number (if know      | wn)                               |                              |
|--------|---|--|---------------------------|-----------------------------------|------------------------------|
|        |   |  | Column A Debtor 1         | Column B Debtor 2 or non-filing s |                              |
| 8.     | Unemployment compensation   |  | \$                        | \$                                |                              |
|        | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:  |  |                           |                                   |                              |
|        | For you \$ For your spouse \$   |  |                           |                                   |                              |
| a      | Pension or retirement income. Do not include any am   |  |                           |                                   |                              |
|        | benefit under the Social Security Act.  | iodini received that was a   | \$                        | \$                                |                              |
|        | Income from all other sources not listed above. Spe<br>Do not include any benefits received under the Social S<br>received as a victim of a war crime, a crime against hur<br>domestic terrorism. If necessary, list other sources on a<br>total below. | Security Act or payments manity, or international or a separate page and put the |                           |                                   |                              |
|        | •   |  | . \$                      | \$                                |                              |
|        | Total amounts from separate pages, if any.  |  |                           |                                   |                              |
| 44     | , , ,   |  |                           |                                   |                              |
| 11.    | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total   | tal for Column B.  | + \$                      |                                   | = \$                         |
|        |   |  |                           |                                   | Total current monthly income |
| Part : | Determine Whether the Means Test Applies to   | o You  |                           |                                   |                              |
| 12.    | Calculate your current monthly income for the year.   | . Follow these steps:  |                           |                                   |                              |
|        | 12a. Copy your total current monthly income from line 1   | 11   | Copy line                 | 11 here=>                         | \$                           |
|        |   |  |                           |                                   |                              |
|        | Multiply by 12 (the number of months in a year)   |  |                           |                                   | <b>x</b> 12                  |
|        | 12b. The result is your annual income for this part of the  | e form   |                           | 12b.                              | \$                           |
| 13.    | Calculate the median family income that applies to  | you. Follow these steps:   |                           |                                   |                              |
|        | Fill in the state in which you live.  |  |                           |                                   |                              |
|        |   |  |                           |                                   |                              |
|        | Fill in the number of people in your household.   |  |                           |                                   |                              |
|        | Fill in the median family income for your state and size<br>To find a list of applicable median income amounts, go<br>for this form. This list may also be available at the bank  | online using the link spec   | ified in the separate ins | 13.<br>tructions                  | \$                           |
| 14.    | How do the lines compare?   | . ,  |                           |                                   |                              |
|        | 14a.  Line 12b is less than or equal to line 13. Of Go to Part 3.   | n the top of page 1, check   | box 1, There is no pre    | sumption of abuse                 | 9.                           |
|        | 14b.  Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.   | of page 1, check box 2, Th   | ne presumption of abuse   | e is determined by                | Form 122A-2.                 |
| Part : | 3: Sign Below   |  |                           |                                   |                              |
| rait   | By signing here, I declare under penalty of perjury   | that the information on th   | is statement and in any   | attachments is tru                | ie and correct               |
|        |   | that the information on th   | is statement and in any   | attaciments is tre                | de and correct.              |
|        | X /s/ Keith Lee Barton  Keith Lee Barton  Signature of Debtor 1   |  |                           |                                   |                              |
|        | Date <b>April 4, 2017</b>   |  |                           |                                   |                              |
|        | MM / DD / YYYY  If you checked line 14a, do NOT fill out or file Forn   | n 122A-2   |                           |                                   |                              |
|        | If you checked line 14b, fill out Form 122A-2 and fi  |  |                           |                                   |                              |
|        | ii you onconcumic 170, iii out i oiiii 122/1-2 dilu ii  | no it with this follow.  |                           |                                   |                              |

| Fill ir                    | this inform               | ation to identify you                              | r case:  |                  |  |
|----------------------------|---------------------------|--|--|------------------|--|
| Debto                      | or 1 <b>K</b>             | eith Lee Barton                                    |  |                  |  |
| Debto                      | or 2<br>use, if filing)   |  |  |                  |  |
| Unite                      | d States Ban              | kruptcy Court for the:                             | Southern District of Mississippi   |                  |  |
| Case<br>(if kno            | number<br>own)            |  |  |                  | ☐ Check if this is an amended filing   |
|                            |                           | m 122A - 1S<br>of Exemption                        | upp<br>on from Presumption o   | f Ab             | use Under § 707(b)(2) 12/15  |
| exem <sub>l</sub><br>exclu | pted from a sions in this | presumption of abus                                | e. Be as complete and accurate as poss                                       | ible. If t       | me (Official Form 122A-1), if you believe that you are wo married people are filing together, and any of the plete a separate Form 122A-1 If you believe that this is  |
| Part '                     | 1 Identi                  | fy the Kind of Debts                               | You Have   |                  |  |
|                            | personal, fan             |  | ose." Make sure that your answer is consis                                   |                  | C. § 101(8) as "incurred by an individual primarily for a n the answer you gave at line 16 of the <i>Voluntary Petition for</i>  |
|                            |                           | olement with the signed                            |  | here is r        | no presumption of abuse, and sign Part 3. Then submit this   |
| Part 2                     | 2: Deter                  | mine Whether Military                              | y Service Provisions Apply to You  |                  |  |
| 2.                         | Are you a di              | sabled veteran (as de                              | fined in 38 U.S.C. § 3741(1))?   |                  |  |
|                            | □ No. Go t                | to line 3.   |  |                  |  |
|                            |                           | you incur debts mostly<br>J.S.C. § 101(d)(1); 32 l | while you were on active duty or while you U.S.C. § 901(1).                  | ı were p         | erforming a homeland defense activity?   |
|                            | □ No.                     | Go to line 3.                                      |  |                  |  |
|                            | ☐ Yes.                    |  | on the top of page 1 of that form, check be ent with the signed Form 122A-1. | ox 1, <i>The</i> | ere is no presumption of abuse, and sign Part 3. Then  |
| 3.                         | Are you or h              | ave you been a Rese                                | rvist or member of the National Guard?                                       |                  |  |
|                            | □ No. Co                  | mplete Form 122A-1. I                              | Do not submit this supplement.   |                  |  |
|                            | ☐ Yes. We                 | ere you called to active                           | duty or did you perform a homeland defen                                     | se activ         | ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).  |
|                            | □ No.                     | -  | A-1. Do not submit this supplement.  |                  |  |
|                            |                           | ·  | e following categories that applies:   |                  |  |
|                            |                           | •  | ve duty after September 11, 2001, for at l                                   | east             | If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then  |
|                            |                           | 90 days and was rel                                | ve duty after September 11, 2001, for at leased from active duty on          | ,                | submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a |
|                            |                           |  | nomeland defense activity for at least 90                                    |                  | homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).   |
|                            |                           |  | eland defense activity for at least 90 day, which is fewer than 540 days be  |                  | If your exclusion period ends before your case is closed, you may have to file an amended form later.  |

Official Form 122A-1Supp

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Mississippi

| In re | e Keith Lee Barton  |  | Case N                               | o.                    |                    |
|-------|---|--|--------------------------------------|-----------------------|--------------------|
|       | 1.00 200 20   | Debtor(s)  | Chapte                               |                       |                    |
|       | DISCLOSURE OF COMPENS   | ATION OF ATTO  | RNEY FOR                             | DEBTOR(S)             |                    |
| 1.    | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing o be rendered on behalf of the debtor(s) in contemplation of or  | f the petition in bankruptc                                | y, or agreed to be p                 | aid to me, for servic |                    |
|       | For legal services, I have agreed to accept   |  | \$                                   | 5,000.00              |                    |
|       | Prior to the filing of this statement I have received   |  |                                      | 5,000.00              |                    |
|       | Balance Due   |  |                                      | 0.00                  |                    |
| 2.    | \$335.00 of the filing fee has been paid.   |  |                                      |                       |                    |
| 3.    | The source of the compensation paid to me was:  |  |                                      |                       |                    |
|       | ☐ Debtor ☐ Other (specify): Patricia E  | Bayles-Myrick  |                                      |                       |                    |
| 4.    | The source of compensation to be paid to me is:   |  |                                      |                       |                    |
|       | ■ Debtor □ Other (specify):   |  |                                      |                       |                    |
| 5.    | ■ I have not agreed to share the above-disclosed compens  | ation with any other perso                                 | n unless they are m                  | embers and associat   | es of my law firm. |
|       | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names  |  |                                      |                       | my law firm. A     |
| 6.    | In return for the above-disclosed fee, I have agreed to rende   | r legal service for all aspe                               | cts of the bankrupto                 | cy case, including:   |                    |
|       | <ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, stateme</li> <li>c. Representation of the debtor at the meeting of creditors at</li> <li>d. Representation of the debtor in adversary proceedings ar</li> <li>e. [Other provisions as needed]</li> </ul> | ent of affairs and plan which<br>and confirmation hearing, | ch may be required and any adjourned |                       | bankruptcy;        |
| 7.    | By agreement with the debtor(s), the above-disclosed fee do   | es not include the following                               | ng service:                          |                       |                    |
|       | (   | CERTIFICATION  |                                      |                       |                    |
| this  | I certify that the foregoing is a complete statement of any agbankruptcy proceeding.  | reement or arrangement for                                 | or payment to me for                 | or representation of  | the debtor(s) in   |
|       | April 4, 2017   | /s/ EILEEN N. SI   | HAFFER                               |                       |                    |
| 1     | Date  | EILEEN N. SHAI<br>Signature of Attorn                      |                                      |                       |                    |
|       |   | ATTORNEY AT  |                                      |                       |                    |
|       |   | P O BOX 1177   | 00045 4477                           |                       |                    |
|       |   | JACKSON, MS 3<br>(601) 969-3006                            |                                      | 002                   |                    |
|       |   | enslaw@bellsou   |                                      |                       |                    |
|       |   | Name of law firm   |                                      |                       |                    |